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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>B-1040</b>	
7. Unit Agreement Name	
8. Farm or Lease Name <b>State D "C"</b>	
9. Well No. <b>2</b>	
10. Field and Pool, or Wildcat <b>Paddock</b>	
12. County <b>Lea</b>	

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FOR A C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <b>T. A.</b>	15. Elevation (Show whether DF, RT, GR, etc.) <b>3521' DF</b>
2. Name of Operator <b>Amerada Petroleum Corporation</b>	16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
3. Address of Operator <b>P. O. Box 668 - Hobbs, New Mexico</b>	NOTICE OF INTENTION TO:
4. Location of Well UNIT LETTER <b>E</b> <b>2310</b> FEET FROM THE <b>North</b> LINE AND <b>886.4</b> FEET FROM THE <b>West</b> LINE, SECTION <b>19</b> TOWNSHIP <b>218</b> RANGE <b>37E</b> N.M.P.M.	PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>
SUBSEQUENT REPORT OF:	
REVED AL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <b>Temporarily Abandon</b> <input checked="" type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and state pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

**Closed all valves and temporarily abandoned.**

**Well is no longer economical to produce.**

**NOTE: Will continue to produce Blinbry, Drinkard & Penrose Skelly Zones.**

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED *J. C. A. [Signature]* TITLE **District Superintendent** DATE **1-12-66**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: