NO. OF COPIES RECEIVED							Form C-10			
DISTRIBUTION						Supersedes C-102 and				
SANTA FE			NEW MEXICO	OIL CONS	ERVATION COMMISSION		Effective	-1-65		
FILE						-				
U.S.G.S.	L					1	5a. Indicate T	ype of Lease Fee X		
LAND OFFICE							State			
OPERATOR							5. State Oil &	Gas Lease No.		
								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
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 -" (FORM C-101) FOR SUCH PROPOSALS.)										
I. OIL WELL OTHER-							7. Unit Agreer			
2. Name of Operator								8. Farm or Lease Name		
Humble Oil & Refining Company							A. J. Adkins			
3. Address of Operator							9. Well No.			
P. O. Box 2100, Hobbs, New Mexico 88240							***			
4. Location of Well West K 2260 FEET FROM THE West LINE AND 2310 FEET FROM							10. Field and Pool, or Wildcat Cil Center Blinebry			
THE South LINE, SECTION 10 TOWNSHIP 21-S RANGE 36-E NMPM										
mmmm	~~	,,,	15. Elevation (12, County			
			3596 R		Dr, KI, GR, etc.)		Lea			
Te.			• • •	Indicate N	ature of Notice, Repo			. E.		
NOTIC	CEC)F IN	NTENTION TO:		2082	EQUENT	REPORT C	vr.		
Γ-	7					13	A .	TERING CASING		
PERFORM REMEDIAL WORK	╡		PLUG AND	ABANDON	REMEDIAL WORK			JG AND ABANDONMENT		
TEMPORARILY ABANDON	┥			$ abla$	COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JQ:		PC	AND ABANDONMENT		
PULL OR ALTER CASING	J		CHANGE PL	ANS	OTHER	_				
OTHER					OTHER					
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.										
Move in	er	per	f. 5881. 5883. 5	885.588	rculated hole with 7. Treated perf.	with 50	00 0 gals.	of 15%		
Min. pr	ess	3. l	.500#. Job by Ha	lliburto	njection rate of a	overed a	all load	oil.		
Flowed.	1	est	ed. Well recomp	Tered (1)	ru perf. 5881, 588	,000 وره	, ,007.	Duccessi are		
					•					
						,				
			•							
•										
18. I hereby certify that the	infor	matio	n above is true and comple	e to the best	of my knowledge and belief.					
					<u>.</u>					
LUPI	SIC	SNED	E.S. DAVIS		Dist. Adm. Supvr	1		3-30-65		
SIGNED				TITLE	DISC. WOIL. Subar	•	DATE	<i>y y</i> 0-0 <i>y</i>		
			•							
APPROVED BY				TITLE			DATE			

CONDITIONS OF APPROVAL, IF ANY: