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LAND OFFICE	
OPERATOR	

# 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>OG 2304</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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	<b>none</b>
3. Address of Operator	8. Farm or Lease Name
<b>Box 1822, Roswell, N. M.</b>	<b>Humble State</b>
4. Location of Well	9. Well No.
UNIT LETTER <b>P</b> , <b>2970</b> FEET FROM THE <b>South</b> LINE AND <b>990</b> FEET FROM	<b>1</b>
THE <b>East</b> LINE, SECTION <b>2</b> , TOWNSHIP <b>21S</b> , RANGE <b>33E</b> NMPM.	10. Field and Pool, or Wildcat
	<b>South Lynch</b>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
<b>3790' GL</b>	<b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

Set 4½", J-55, 9.5# casing at 3797', cemented with 75 sx Class C cement, 6# salt per sack @ 14.5#/gal. Tested with 1500# pressure, no pressure drop, job completed 9:20 a.m. 5/21/65. WOC 12 hrs.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>Charles B. Read</u>	TITLE <u>Operator</u>	DATE <u>5/27/65</u>
APPROVED BY <u></u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		