NO. OF COPIES RECEIVED		
DISTRIBUTION	M	Form C-103 Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103
FILE		Effective 1-1-65
U.S.G.S.	36° M. €3 1356	
LAND OFFICE	હાર્થ કું કું કું કહ્યું ક	5a. Indicate Type of Lease
OPERATOR		State X Fee
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. 1.		
- I''	o,, real both ritor banks.	7. Unit Agreement Name
WELL GAS WELL 2. Name of Operator	other- Salt Water Disposal Well	
Rice Engineering & Operating, Inc.		8. Farm or Lease Name E-Ni-E SWD
3. Address of Operator		9. Well No.
P. C. Box 1142, Hobbs, New Mexico		3 -21
4. Location of Well		10 Field and Deel on Wildow
UNIT LETTER 4	40' FEET FROM THE West LINE AND 1520' FEET	To Total and Tool, of Wildedt
		FROM TURICE-MORUMENT
THE South	N 21 TOWNSHIP 215 RANGE 36E	
LINE, SECTION	TOWNSHIP ZID RANGE 30E	NMPM. (())
	15. Elevation (Show whether DF, RT, GR, etc.)	
	3601' KB	12. County
16.		Lea /////////
Check A	Appropriate Box To Indicate Nature of Notice, Report o	r Other Data
NOTICE OF IN	TENTION TO: SUBSEQU	JENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB X	
•	OTHER	,
OTHER		
17. Describe Proposed or Completed Ope	region (Clark)	
work) SEE RULE 1 103.	erations (Clearly state all pertinent details, and give pertinent dates, incl	uding estimated date of starting any proposed
1. Spudded 122" sur	rface hole @ 4:30 PM, 9-6-66.	
2. Run 307'-9-5/8" OD, 32.30#, H-40, 8RT, ST&C new ss casing set # 325'		
. , ₍₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌₌	- 10.10 1m, 9-0-00 and cement circul	ated.
3. Tested 9-5/8" OD casing w/1000# for 30 minutes with no pressure drop		
# 6:00 PM, 9-7-6	o6.	no pressure drop
, , ,		
18. I hereby certify that the information ab	ove is true and complete to the best of my knowledge and belief.	
- 0	to the dest of my knowledge and belief.	
2 M Cal +1	<u>-</u>	
SIGNED A A A A A A A A A A A A A A A A A A A	TITLE Division Manager	DATE_Sept. 8. 1966
	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW	DATE Sept. 8, 1966
	The state of the s	
APPROVED BY	TITLE 1 A STATE TO A	DATE
CONDITIONS OF APPROVAL, IF ANY:		DATE