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NEW MEXICO OIL CONSERVATION COMMISSION

3-NMOCC
1-File

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-2330

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 Tidewater Oil Company	8. Farm or Lease Name State E
3. Address of Operator Box 249, Hobbs, New Mexico	9. Well No. 3
4. Location of Well UNIT LETTER P , 660 FEET FROM THE East LINE AND 760 FEET FROM THE South LINE, SECTION 16 TOWNSHIP 21S RANGE 36E NMPM.	10. Field and Pool, or Wildcat Eunice (Grayburg-SA)
15. Elevation (Show whether DF, RT, GR, etc.) 3607 Gr.	12. County Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Spudded at 10:15 A.M. 10-18-66. Drilled 12-1/4" hole to 1311'. Set 8-5/8" 24# J-55 casing at 1305'. Cemented with 400 sacks reg. 50-50 Diamix with 14# salt per sack and 150 sacks Incor neat. Circulated estimated 40 sacks cement. WOC 24 hours, tested 8-5/8" casing with 1200# for 30 minutes, no drop in pressure.

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

Original Signed By

SIGNED G. L. WADE

TITLE Area Supt.

DATE 10-21-66

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

