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NEW MEXICO OIL CONSERVATION COMMISSION

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

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>		5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		5. State Oil & Gas Lease No. E-1922
2. Name of Operator William J. LeMay		7. Unit Agreement Name
3. Address of Operator Box 2244, Santa Fe, New Mexico 87501		8. Farm or Lease Name Phillips State
4. Location of Well UNIT LETTER A , 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 10 TOWNSHIP 21-S RANGE 34-E NMPM.		9. Well No. 1
15. Elevation (Show whether DF, RT, GR, etc.)		10. Field and Pool, or Wildcat undesignated
12. County Lea		

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <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.

November 22-Spudded at 12:00 Noon

November 23-Ran 133' 54#, 13 3/8" casing and circulated cement to surface with 150 sacks of regular neat cement. W.O.C. 18 hours.

November 24-Drilled out and bail tested--dry for 30 minutes.

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

SIGNED <u>William J. LeMay</u>	TITLE <u>Operator</u>	DATE <u>27 November, 1967</u>
APPROVED BY <u>[Signature]</u>	TITLE _____	DATE _____

CONDITIONS OF APPROVAL, IF ANY: