

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

5a. Indicate Type of Lease
State ☐ Fee ☒
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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator Sun Exploration & Production Company	8. Farm or Lease Name J.A. Akens
3. Address of Operator P.O. Box 1861 Midland, Texas 79702	9. Well No. 13
4. Location of well UNIT LETTER 0 2310 FEET FROM THE South LINE AND 330 FEET FROM THE East LINE, SECTION 3 TOWNSHIP 21S RANGE 36E NMPM.	10. Field and Pool, or Wildcat Hardy Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3530.9' GR	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☒	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	

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.

- 9/2/86 R&C 65 jts. 8-5/8", 24#, K-55 STC csg set @ 2690', FC @ 2640'. Howco cmnt w/850 sks "C" Howco Lite + 10% salt + 1/4#/sx Flocele, tailed, in w/300 sks "C" + 2% CaCl₂, FP 850-1400, Float held, circ 305 sks cmt to surf.
- 9/18/86 R&C 182 jts. 5-1/2" csg, 15.50 & 17#, J,K,L, LT&C, Butt & ST, set @ 6950', FC 6876'. Howco pumped 500 gals mud flush + 5 bbls 2% KCL, 500 gals Flochek-21, 5 bbls 2% KCL, cmt'd w/475 sks Howco Lite w/10% salt + 5# gilsonite + 1/4# Flocele followed by 575 sks H, 50/50 poz w/2% gel, 6# salt, FP 2000-2500 float held, circ 0 sks cmt. Ran temp surv. 9/19/86, TOC @ 2700'.

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

SIGNED [Signature] TITLE Associate Accountant DATE 10/14/86

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE 10/27/1986

CONDITIONS OF APPROVAL, IF ANY: