				ş	Form C-103		
NO. OF COPIES RECEIVED					Supersedes	Old	
DISTRIBUTION				h-Mari	C-102 and C		
SANTAFE	NEW MEXICO	OIL CONS	ERVATION COMMISSION		Effective 1	. -6 5	
FILE			ļ.	îay (j	sa. galicate Tvi	of Lease	
U.S.G.S.			1	IRI U	State	Fee. X	7 I
LAND OFFICE					5. State Oil & C		
OPERATOR						ids Lease No.	
	- 				NMJ-577		
(DO NOT USE THIS FORM FOR	DRY NOTICES AND REP	ORTS ON	WELLS ACK TO A DIFFERENT RESERVOI	R.			
1.	TOATTON TON TENANT			-	7. Unit Agreem	ent Name	
OIL GAS WELL	OTHER+				8. Farm or Lea	se Name	
2. Name of Operator					B. A. Chr		1
TEXAS PACIFIC OIL COMPANY					9. Well No.		
3. Address of Operator P.O. Box 1069 - Hobbs, New Mexico					6		
4. Location of Well					10. Field and Pool, or Wildcat		
UNIT LETTER	660 FEET FROM THE	West	LINE AND1980	FEET FROM	South Eur	i ic e	~~
	ECTION 28 TOWNSH			NMPM.			
mmmm	15. Elevation (S.	how whether	DF. RT. GR. etc.)		12. County	, ////////	111
	13. Elevation (5.		6		Lea		$\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{$
16. Che	ck Appropriate Box To I	Indicate N	ature of Notice, Repo	ort or Oth	ner Data		
	F INTENTION TO:				REPORT O	F:	
	PLUG AND A	BANDON [REMEDIAL WORK	\Box	ALT	ERING CASING	
PERFORM REMEDIAL WORK	PLUG AND A	BANDON		Ħ		S AND ABANDONMENT	Ħ
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.		, 20	, Allo Adallo dillini	
PULL OR ALTER CASING	CHANGE PLA	ANS	CASING TEST AND CEMENT JO		laa ii baaadaya	~ ~	\mathbf{x}
		[- -1	OTHERTen	morari.	ry abandon	20	€
OTHER							
17. Describe Proposed or Complete	(01 1 11		ails and sine partinent date	s including	estimated date of	of starting any prop	osed
17. Describe Proposed or Complete	ed Operations (Clearly state all	pertinent aet	aus, and give pertinent date.	s, including	estimated date	, starting any prop	
work) SEE RULE 1 103.							
Held for possible	remedial work.						
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				,			
				•			
18. I hereby certify that the inform	nation above is true and complet	e to the best	of my knowledge and belief.				
Original Signe	eu oy	TITLE	Area Superintende	nt	DATE	5-10-67	
Sheldon We	ord ,						
	·	* * * · · ·	t v				
	\				DATE		
A PREDVED BY		TITLE			DATE		

CONDITIONS OF APPROVAL, IF ANY: