

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

NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

<p align="center">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.)</p>		
<p>1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>Water Injection</u></p>	<p>7. Unit Agreement Name <u>South Eunice</u></p>	
<p>2. Name of Operator <u>Continental oil Co.</u></p>	<p>8. Farm or Lease Name <u>South Eunice Unit</u></p>	
<p>3. Address of Operator <u>Box 460 Hobbs, N. Mexico</u></p>	<p>9. Well No. <u>45</u></p>	
<p>4. Location of Well UNIT LETTER <u>K</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>28</u> TOWNSHIP <u>22S</u> RANGE <u>36E</u> NMPM.</p>	<p>10. Field and Pool, or Wildcat <u>South Eunice 7 Rivers Queen</u></p>	
<p>15. Elevation (Show whether DF, RT, GR, etc.) <u>3509' gr</u></p>		<p>12. County <u>Lea</u></p>

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

OTHER ☐

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOB ☐

OTHER Converting to inj ☒

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.

Pulled producing equipment from well. Ran packer on cement-lined tubing and set at 3590' w/10 pt5 tension.

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

SIGNED Robert Gault TITLE Admin. Supervisor DATE 11-7-72

APPROVED BY Joe D. Ranney TITLE Dist. I, Supv. DATE 11-7-72

CONDITIONS OF APPROVAL, IF ANY:

NMOCC(4) S. Eunice Unit (22) File