NO. OF COPIES RECEIVED		•	Form C-103
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION		Supersedes Old
SANTA FE			C-102 and C-103 Effective 1-1-65
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State X Fee
OPERATOR	·		5. State Oil & Gas Lease No.
	1		B-2657
SHIND	Y NOTICES AND DEDORTS OF	(WELL C	mminimini.
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.			7. Unit Agreement Name
WELL SAS WELL	OTHER-		7. Ome Adequient Manie
2. Name of Operator			8. Farm or Lease Name
Continental Oil Company			
3. Address of Operator			9. Well No.
P. O. Box 460, Hobbs, New Mexico 88240			5, West No.
4. Location of Well			10 Field and Beel on William
4/ 1900 10 11			10. Field and Pool, or Wildcat
UNIT LETTER H . 1980 FEET FROM THE North LINE AND 1660 FEET FROM			FROM Steen Rivers
6. 4	~ ~		
THE LINE, SECTIO	N 32 TOWNSHIP 22-	S RANGE 36-E , N	MPM. (())
mmmmmmmm		7.0	
	15. Elevation (Show whethe		12. County
	3495	KB ·	Ken
Check A	Appropriate Box To Indicate 1	Nature of Notice, Report of	Other Data
NOTICE OF IN	TENTION TO:		ENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ASANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOS	PLUG AND ABANDONMENT
		OTHER Zemperant	Carlon La. 5
OTHER		OT REAL PROPERTY.	y warnen
			•
 Describe Proposed or Completed Operark) SEE RULE 1 103. 	erations (Clearly state all pertinent de	ails, and give pertinent dates, incli	ding estimated date of starting any proposed
worky out Note 1103.			
_	•		
Status of Well: Zempananly abonfones			
Approximate date that temp. aban, commenced: 5-31-61			
Reason for temp. aban.: Uneconomical			
•	an conomical		
Future plans for Well:			
, and 101 W022	•		
STUDY FOR REMEDIAL WORK			
-			
•	/ .		
<i></i>	11/1/20		
EXPI	res 11/1/75		
	- / /		
			•
Approximate date of future W.O. or plugging: 3 978 1975			
		·	
8. I hereby certify that the information a	bove is true and complete to the best	of my knowledge and belief.	
	02		
IGNED / Street Str	TITLE	Division Office Manage	T DATE 10/30/74
			DATE FUTUUT F
(Orn Count by		₹ <u>*</u> *
	8 Dy	The state of the s	₹

NMOCC-4, E:/E.