Keine- F	والمحار المحار		·=×				
NO. OF COPIES RECEIVED					Form C-103		
DISTRIBUTION					Supersedes Oi C-102 and C-1		
SANTA FE	NEW MEXICO O	IL CONSER	VATION COMMISSION		Effective 1-1-1	55	
FILE				r	5a. Indicate Type	of Lease	
U.S.G.S.					State State	Fee T	
LAND OFFICE				}	5. State Oil & Ga		
OPERATOR							
STINDE	V NOTICES AND REPOI	RTS ON W	FIIS		HHHH	MITTITITI	
(DO NOT USE THIS FORM FOR PRO USE **APPLICAT	RY NOTICES AND REPORT OF THE PROPERTY OF THE P	OR PLUG BACK	(TO A DIFFERENT RESERVOIR.	·			
1.					7. Unit Agreemen	t Name	
WELL WELL	OTHER-				8. Farm or Lease	Name	
2. Name of Operator					Otis L. Jones "C"		
John H. Hendrik 3. Address of Operator					9. Well No.		
316 Central Bldg,	Midland, Texas '	79701			2		
4. Location of Well					10. Field and Po	ol, or Wildcat	
UNIT LETTER	660 FEET FROM THE SO	outh	_ LINE AND 990 F	FEET FROM	Seven Ri	vērs—Juoca	
UNIT REVIEW							
THE LOST LINE, SECTI	ON 34 TOWNSHIP.	<u> 22S</u>	hange36E	NMPM.			
	(2)	tt DI	P. P.T. C.P. ata 1		12. County	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	15. Elevation (Short	w whether Di	, N1, ON, etc.)		Lea		
		1' >>	CN D	0.1		<i></i>	
	Appropriate Box To Inc	dicate Nat			er Data REPORT OF:		
NOTICE OF I	NTENTION TO:		30031	LQULIT	1121 0111 011		
PERFORM REMEDIAL WORK	PLUG AND ABA	ANDON	REMEDIAL WORK		ALTER	ING CASING	
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.		PLUG A	AND ABANDONMENT	
PULL OR ALTER CASING	CHANGE PLANS	s 🔲	CASING TEST AND CEMENT JQB				
			OTHER		*****		
OTHER		— []					
17. Describe Proposed or Completed C	perations (Clearly state all per	rtinent detail	s, and give pertinent dates,	including	estimated date of	starting any proposed	
work) SEE RULE 1103.							
1. Morkover operat	ions commenced	April :	24, 1972.				
1. Morkover operat 2. Pulled rods, pu 3. Spotted 1500 ga	ump and tubing.	Set RT.	BP @ 3592.	A 257	d 2577	3550	
3. Spotted 1500 ga	11. 15% acid and	i perio	raced W/IDDFF	@))/	و ۱۱/۲ و ٥	JJJ/ ,	
3. Spotted 1500 ga 3550, 3539, 352 4. Halliburton Tra 20-40 sand and pressure, ISIP	10 & 351(0)	1 000 m	al. 9.24 trieat	ed br	ine. 30.0	000#	
4. Hallburton ire	30 000# 10 - 20 s	sand. A	IR 25 BPM @ 20	000// a	vg. treat	ing	
nnossure TSTP	800#. 15 minute	SIP 2	50#•	.,		_	
5. Pulled RTBP, ra	an tubing and re	sturned	well to produ	iction	•		
,							
		p Pool	36#2				
	70,		(1)				
	To	is Pool	359-				
	• /				e.		
18. I hereby certify that the information	on above is true and complete t	to the best of	my knowledge and belief.				
18. I hereby certify that the information	/ Line to input to		• · · · · · · · · · · · · · · · · · · ·				
(In the Kt K	fluf -y	Own	er-Operator		DATE 4-27	7-72	
SIGNED	<u>' </u>	TITLE					
//	Orig. Signed by				Ą	MAY 1 1972	
APPROVED BY	Joe D. Remey	TITLE			DATE 1	1H1 . 15/6	
CONDITIONS OF APPROVAL, IF AN	Yı Dist. I, Supv.						

LLMED

1. . 2. 1022

HOURT W. O.L. CORESPONDED C. Smill.