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NEW MEXICO OIL CONSERVATION COMMISSION

HOBBS OFFICE C.C.  
Supersedes Old  
C-102 and C-103  
Effective 11-1-66  
MAY 12 3 32 PM '66

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator <b>TEXAS PACIFIC OIL COMPANY</b>		8. Farm or Lease Name <b>King S.E.</b>
3. Address of Operator <b>P.O. Box 1069 - Hobbs, New Mexico</b>		9. Well No. <b>4</b>
4. Location of Well UNIT LETTER <b>0</b> , <b>1650</b> FEET FROM THE <b>East</b> LINE AND <b>990</b> FEET FROM THE <b>South</b> LINE, SECTION <b>1</b> TOWNSHIP <b>23</b> RANGE <b>36</b> N.M.P.M.		10. Field and Pool, or Wildcat <b>Langle Mattix</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3400' GL</b>		12. County <b>Lea</b>

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <b>TEMPORARILY ABANDONED</b> <input checked="" type="checkbox"/>

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.

**HELD FOR POSSIBLE REMEDIAL WORK AND SECONDARY RECOVERY.**

THE COMMISSION MUST BE NOTICED EVERY 6 MONTHS ON FORM C-102 AS TO THE WELL STATUS AND ON FORM C-103 FOR FUTURE PLANS FOR THE WELL.

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

SIGNED **Original signed by: Sheldon Ward** TITLE **Area Superintendent** DATE **5-10-66**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

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NEW MEXICO OIL CONSERVATION COMMISSION

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

Nov 15

5a. Indicate Type of Lease  
State 833 AM '65 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator <b>TEXAS PACIFIC OIL COMPANY</b>	8. Farm or Lease Name <b>King, S.E.</b>
3. Address of Operator <b>P.O. Box 1069 - Hobbs, New Mexico</b>	9. Well No. <b>4</b>
4. Location of Well UNIT LETTER <u>0</u> <u>1650</u> FEET FROM THE <u>East</u> LINE AND <u>990</u> FEET FROM THE <u>South</u> LINE, SECTION <u>1</u> TOWNSHIP <u>23</u> RANGE <u>36</u> N.M.P.M.	10. Field and Pool, or Wildcat <b>Langlie-Mattix</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3400' GL</b>	12. County <b>Lea</b>

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐ OTHER Temporarily Abandoned ☒

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.

**Temporarily Abandoned. Held for remedial work and secondary recovery possibilities.**

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

SIGNED H. W. DEATS TITLE Area Engineer DATE 11-11-65

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: