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NEW MEXICO OIL CONSERVATION COMMISSION - C. C.

3-NMOCC  
1-File

JUN 16 11 52 AM '66

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 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>Tidewater Oil Company</b>	8. Farm or Lease Name <b>E. F. King</b>
3. Address of Operator <b>Box 249, Hobbs, New Mexico</b>	9. Well No. <b>3</b>
4. Location of Well UNIT LETTER <b>K</b> <b>1980</b> FEET FROM THE <b>South</b> LINE AND <b>1980</b> FEET FROM <b>West</b> LINE, SECTION <b>1</b> TOWNSHIP <b>23 S</b> RANGE <b>36 E</b> N.M.P.M.	10. Field and Pool, or Wildcat <b>Langlie Mattix</b>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County <b>Lea</b>

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐  
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.

Well was producing approximately 4 BOPD from Queen perforations 3717-3732'. In an attempt to increase production, perforated 5 1/2" casing with two shots each at 3673.5, 3677, 3689.5, 3693 and 3703'. Treated perforations with 1000 gals NE acid, 40,000 gals lease crude and 45,000# 10-20 sand. Cleaned out sand to 3787'. Set 2-3/8" tubing at 3718', ran rods and put well on pump.

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

Original Signed By

SIGNED **J. L. WADE**

TITLE **Area Supt.**

DATE **6-15-66**

APPROVED BY 

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: