

CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input 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 Sun Exploration & Production Co.	8. Farm or Lease Name State "A" A/C-1
3. Address of Operator P. O. Box 1861, Midland, Texas 79702	9. Well No. 68
4. Location of Well UNIT LETTER <u>A</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>23-S</u> RANGE <u>36-E</u> NMPM.	10. Field and Pool, or Wildcat Langlie Mattix 7 Rvrs Queen Grayburg
15. Elevation (Show whether DF, RT, GR, etc.) 3426 GR	12. County Lea

16. 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 JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER request permission to keep this well TA'd. <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.

1. This well was TA'd 9-22-82.
2. This well is being held for secondary recovery.
3. We anticipate returning this well to production by December 1983.
4. The well is properly capped & there is no evidence of casing leak.
5. Bradenhead pressure 0#, casing pressure 24#, tubing pressure 0#.

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

SIGNED Maria L. Perez TITLE Sr. Acctng. Asst. DATE 3-11-83

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE MAR 16 1983

CONDITIONS OF APPROVAL, IF ANY:

Expires 3/16/84