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LAND OFFICE	
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OIL CONSERVATION DIVISION

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

Form C-103
Revised 10-1-7

5a. Indicate Type of Lease
State ☐ 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 Sun Exploration & Production Co.	8. Farm or Lease Name Annie Christmas
3. Address of Operator P. O. Box 1861 Midland, TX 79702	9. Well No. 1
4. Location of Well UNIT LETTER N 669 FEET FROM THE South LINE AND 1986.4 FEET FROM THE West LINE, SECTION 1 TOWNSHIP 22-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Drinkard/Wantz Granit Wash
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" 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"/>

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. MIRU. POH w/rods & Pump. Install BOP.
2. POH w/ tbgs, TAC & OSTSD. *Note: combination tbgs string.
3. RIH w/top half OSTSD w/lugs on 2-3/8 tbgs.
4. Latch onto lower half OSTSD at 7180.
5. POH w/RH pkr, 2-3/8 tbgs and OSTSD on WB pkr.
6. RIH w/pumping setup. 2-3/8 TS 7200. SN 7170.
7. TAC 5900
8. RIH w/1 1/2 pump on 76 RS.

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

SIGNED DeAnn Kemp TITLE Associate Accountant

DATE 8-28-84

ORIGINAL RETURNED BY DEPT SECTION

APPROVED BY DIRECTOR

TITLE ASSOCIATE ACCOUNTANT

DATE AUG 30 1984

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 29 1984

HOARD OFFICE