

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

**HOBBS OFFICE O.C.C.**  
**NEW MEXICO OIL CONSERVATION COMMISSION**  
**JUN 2 11 35 AM '67**

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.
7. Unit Agreement Name
8. Farm or Lease Name <u>H. Corrigan</u>
9. Well No. <u>6</u>
10. Field and Pool, or Wildcat <u>Brunson</u>
12. County <u>Lea</u>

### 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>T.A.</u>
2. Name of Operator <u>Amarada Petroleum Corporation</u>
3. Address of Operator <u>P. O. Box 668 - Hobbs, New Mexico</u>
4. Location of Well UNIT LETTER <u>B</u> , <u>721</u> FEET FROM THE <u>North</u> LINE AND <u>2051</u> FEET FROM THE <u>East</u> LINE, SECTION <u>4</u> TOWNSHIP <u>22-S</u> RANGE <u>37-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) <u>3466' DF</u>

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"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>T.A.</u> <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.

**FOR RECORD ONLY: This well is temporarily abandoned with no other plans at this time.**

THE COMMISSION MEETS EVERY MONTHS ON FOR AS TO THE WELL STATUS AND FUTURE PLANS FOR THIS WELL

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

SIGNED <u>[Signature]</u>	TITLE <u>Asst. Dist. Supt.</u>	DATE <u>6-1-67</u>
APPROVED BY <u>[Signature]</u>	ORIGINAL FILED BY <u>[Signature]</u>	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		