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# NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-934

## 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 Humble Oil & Refining Co.	8. Farm or Lease Name N. M. State M
3. Address of Operator Box 2100, Hobbs, New Mexico	9. Well No. 29
4. Location of Well UNIT LETTER N 660 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 19 TOWNSHIP 22-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Langlie Mattix
15. Elevation (Show whether DF, RT, CR, etc.) 3428 RDB	12. County Lea

## 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 ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

OTHER \*Additional Recovery Area  
[ ] of [ ] of [ ]

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOBS ☐  
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.

- Perforate with one selectively fired radioactive jet at each of the following depths: 3656, 3658, 3660, 3662, 3677, 3679, 3681, 3691, 3694, 3696, 3700, 3711, 3714, 3716.
- Frac down 2-7/8-inch casing with 10,000 gallons lease crude and 1 pound of sand per gallon using ball sealers.

/mcb

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

SIGNED [Signature] TITLE Dist. Admin. Supvr. DATE 4-19-65

APPROVED BY [Signature] TITLE  DATE

CONDITIONS OF APPROVAL, IF ANY: