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OR	

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 type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
NMR 457	
7. Unit Agreement Name	
8. Farm or Lease Name	
CARY, Will	
9. Well No.	
7	
10. Field and Pool, or Wellhead	
BLINEBRY OIL	
12. County	
LEA	

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 ☐ GAS WELL ☐ OTHER

2. Name of Operator
TEXAS PACIFIC OIL COMPANY INC

3. Address of Operator
P.O. Box 4067, MIDLAND, TEXAS 79701

4. Location of Well
UNIT LETTER F 1874 FEET FROM THE NORTH LINE AND 2086 FEET FROM THE WEST LINE, SECTION 22 TOWNSHIP 22-S RANGE 37-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3359 GR

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 CASINGS <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"/>	WELL STATUS <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of any proposed work) SEE RULE 1103.

This well is to be placed back on production in the near future. Necessary repairs have been made and a battery has been built for this well and well No. 8. Presently waiting for a gas contract.

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

SIGNED W. G. McClinton TITLE Area Supt

APPROVED BY _____

TITLE _____

DATE _____

Expires 11-1-76
(2)

6-10-76

DATE _____

CONDITIONS OF APPROVAL, IF ANY: