NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION	,	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION $-arphi ar{U}_U$	Effective 1-1-65
FILE		
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		
OPERATOR		5. State Oil & Gas Lease No.
SUNDR	AY NOTICES AND REPORTS ON WELLS Operates to drill or to deepen or plug back to a different reservoir. Ion for permit	
OIL GAS	OTHER-	7. Unit Agreement Name
2. Name of Operator	UTRER-	8. Farm or Lease Name
TEXAS PACIFIC OIL COMP	ANY	BOYD 9. Well No.
3. Address of Operator B O Boy 1069 - Hobbs	New Mexico	3
P. O. Box 1069 - Hobbs 4. Location of Well	660 FEET FROM THE NORTH LINE AND 660 FEET	10, Field and Pool, or Wildcat
P. O. Box 1069 - Hobbs 4. Location of Well UNIT LETTER	660 FEET FROM THE NORTH LINE AND 660 FEET	10, Field and Pool, or Wildcat
P. O. Box 1069 - Hobbs 4. Location of Well UNIT LETTER	660 FEET FROM THE NOTTO LINE AND 660 FEET	3 10. Field and Pool, or Wildcat FROM Drinkerd
P. O. Box 1069 - Hobbs 4. Location of Well UNIT LETTER	660 FEET FROM THE North LINE AND 660 FEET on 23 TOWNSHIP 22-S RANGE 37-E N 15. Elevation (Show whether DF, RT, GR, etc.) Appropriate Box To Indicate Nature of Notice, Report of	3 10. Field and Pool, or Wildcat FROM Drinkerd IMPM. 12. County 12. County Lee r Other Data
P. O. Box 1069 - Hobbs 4. Location of Well UNIT LETTER	660 FEET FROM THE North LINE AND 660 FEET ON 23 TOWNSHIP 22-S RANGE 37-E N 15. Elevation (Show whether DF, RT, GR, etc.) Appropriate Box To Indicate Nature of Notice, Report of	3 10. Field and Pool, or Wildcat FROM Drinkerd IMPM. 12. County Lee
P. O. Box 1069 - Hobbs 4. Location of Well UNIT LETTER	660 FEET FROM THE North LINE AND 660 FEET on 23 TOWNSHIP 22-S RANGE 37-E N 15. Elevation (Show whether DF, RT, GR, etc.) Appropriate Box To Indicate Nature of Notice, Report of	3 10. Field and Pool, or Wildcat PROM Drinkard IMPM. 12. County Lea r Other Data JENT REPORT OF: ALTERING CASING PLUG AND ABANDONMENT

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work) SEE RULE 1103.

7-23-68 Bottom-hole pump equipment was repaired and well was placed back on production.

18. I hereby certify that the information above is true and complet Original Signed by	te to the best of my knowledge and belief.	
SIGNED Sheldon Ward	TITLE Area_Superintendent	DATE 7-29-68
APPROVED BY BILL APPROVAL, IF ANY:	TITLE	DATE