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LAND OFFICE	
OPERATOR	

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.
3-934

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	8. Farm or Lease Name
HUMBLE OIL & REFINING COMPANY	H. N. State "NM"
3. Address of Operator	9. Well No.
Box 2100, Hobbs, New Mexico 88240	22
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER "B" 660 FEET FROM THE North LINE AND 1980 FEET FROM	Langlie Mattix
THE East LINE, SECTION 29 TOWNSHIP 22-S RANGE 37-E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3364 DF	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 ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOB ☐

OTHER ☒ Convert to water injection well.

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.

Moved in and rigged up contract unit. Pulled rods and tubing. Released unit. Moved in and rigged up company unit. Ran 1-1/2" plastic coated tubing and Camco Packer. Packer set at 3528'. Spotted inhibited water in annulus of well. Well recompleted as a water injection well thru perforations 3559-3564, 3576-3586 and 3600-3605.

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

SIGNED  TITLE District Adm. Suovr. DATE 10-11-65

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: