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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 type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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 checked="" type="checkbox"/> OTHER- Shut In		7. Unit Agreement Name
2. Name of Operator Summit Energy, Inc.		8. Farm or Lease Name A.M. Drinkard
3. Address of Operator 112 N. First, Artesia, New Mexico 88210		9. Well No. 1
4. Location of Well UNIT LETTER <u>I</u> <u>2054</u> FEET FROM THE <u>South</u> LINE AND <u>658.8</u> FEET FROM THE <u>East</u> LINE, SECTION <u>30</u> TOWNSHIP <u>22S</u> RANGE <u>38E</u> NMPM.		10. Field and Pool, or Wildcat Tubb (Gas)
15. Elevation (Show whether DF, RT, GR, etc.) 3381 GR		12. County Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>
	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

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>See Below</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 1705.

The Tubb Gas Zone produced through the casing/tubing annulus on this dual completion. This zone is depleted, however; the Drinkard Oil Zone is still flowing through the tubing.

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

SIGNED Rene M. White TITLE Division Engineer DATE 9/25/74

Orig. Signed by
Rene M. White

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: