

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-7

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DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
983-2

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Salt Water Disposal	7. Unit Agreement Name
2. Name of Operator Sun Exploration & Production Co.	8. Farm or Lease Name State "A" A/C-1
3. Address of Operator P. O. Box 1861 Midland, TX 79702	9. Well No. 101
4. Location of Well UNIT LETTER M 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 11 TOWNSHIP 23-S RANGE 36-E NMPM.	10. Field and Pool, or Wildcat Langlie Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3418' GR	12. County Lea

16. 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 Pressure test well ☒

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.

Order No. SWD-75, dated 9-11-68

9-5-84 Loaded annulus w/85 bbls 2% KCL wtr and 1% corrosion inhibitor.
Pressured annulus to 300 psi for 15 minutes, held O.K.
Test recorded by pressure chart and witnessed by Ron Castleberry of the OCC.

Info called in by Don Mitchell-Jal Segment

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

SIGNED Maria L. Perez TITLE Senior Accounting Assistant DATE 9-7-84
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

SEP 12 1984

RECEIVED

SEP 11 1984

O.C.D.
HOBBS OFFICE