r	7		
NO. OF COPIES RECEIVED	-		Form C-103 Supersedes Old
DISTRIBUTION	_		C-102 and C-103
SANTA FE	NEW MEXICO OIL CONS	ERVATION COMMISSION	Effective 1-1-65
FILE		8	5a. Indicate Type of Lease
U.S.G.S.		6	
LAND OFFICE			State hb Fee X
OPERATOR			5, State Oil & Gas Lease No.
			1015 936
(DO NOT USE THIS FORM FOR PR USE "APPLICA	RY NOTICES AND REPORTS ON POPOSALS TO DRILL OR TO DEEPEN OR PLUG B TION FOR PERMIT -" (FORM C-101) FOR SUC	WELLS ACK TO A DIFFERENT RESERVOIR.	
1. OIL GAS WELL	OTHER-		7. Unit Agreement Name
2. Name of Operator			8. Farm or Lease Name
TEXAS BACTETC OTL CO	Danglade		
3. Address of Operator			9. Well No.
R. A. Rey 1060 - Natha New Jon 60 88940			3
P. O. Box 1069 - Hobbs, New Mexico 88240 4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER	660 FEET FROM THE SOUTH	1980 FEE	T FROM Undesignated
UNIT LETTER		LINE AND FEE	
THELINE, SECT	10N13TOWNSHIP22-5	RANGE 37	NMPM. ())))))))))))))))))))))))))))))))))))
	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
	3314.	9' GR	
<sup>16.</sup> Check	Appropriate Box To Indicate N	ature of Notice. Report of	or Other Data
	NTENTION TO:	-	UENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON			PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		OTHER	
OTHER			
17 Describe Proposed of Completed C	perations (Clearly state all pertinent det.	ails and give pertinent dates inc	luding estimated date of starting any proposed

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.

1. Moved in, rigged up. Spudded well 6:00 PM 9-4-68.

2. Ran 37 jts. 9-5/8" casing. Set @ 1162'.

3. Cemented with 450 sks. / 2% CA CL. Cement Circulated. WOC 8 hrs.

4. Tested 9-5/8" csg. to 1000#. Held for 30 min. Test OK.

5. Continue drilling.

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

Original Signed by Sheldon Ward	TITLE Area Superintendent	DATE	9-9-68
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE	- 10 <b>X</b>