

NEW MEXICO OIL CONSERVATION COMMISSION

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OPERATOR	

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Federal Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. NM-0557256

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 NMFU
2. Name of Operator CONTINENTAL OIL COMPANY	8. Farm or Lease Name Edwards B-20
3. Address of Operator BOX 460, HOBBS, NEW MEXICO 88240	9. Well No. 2
4. Location of Well UNIT LETTER <u>G</u> , <u>1980</u> FEET FROM THE <u>NORTH</u> LINE AND <u>1980</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>20</u> TOWNSHIP <u>22</u> RANGE <u>37</u> NMPM.	10. Field and Pool, or Wildcat IANGLIE MATTIX
15. Elevation (Show whether DF, RT, GR, etc.)	12. County LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <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 1503.

Cellar dug out; outlets of bradenheads from first string of pipe cemented in the well and all subsequent heads to, and including, the tubing head exposed.

Inspected and approved by L. A. Clements, New Mexico Oil Conservation Commission 8-12-75.

NMOCC (3) FILE

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

SIGNED B. Dillman TITLE Sr. Staff Assistant DATE 8-14-75

APPROVED BY [Signature] TITLE Geologist DATE SEP 11 1975

CONDITIONS OF APPROVAL, IF ANY: