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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 checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E.6622
7. Unit Agreement Name
8. Farm or Lease Name North E/Mar Unit
9. Well No. 54
10. Field and Pool, or Wildcat E/Mar Del Norte
12. County Lea

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 type="checkbox"/> OTHER- Water Injection Well
2. Name of Operator Continental Oil Company
3. Address of Operator Box 460, Hobbs, N.M. 88240.
4. Location of Well UNIT LETTER F 2108 FEET FROM THE West LINE AND 543 FEET FROM THE South LINE, SECTION 36 TOWNSHIP 26S RANGE 32E N.M.P.M. 15. Elevation (Show whether DF, RT, GR, etc.) 3102' DF

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Convert to Injection <input checked="" 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 <input 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 1103.

IT IS Proposed to convert this Well to Injection as follows;

1. Pull Producing Equipment From Well,
2. Clean out Fill
3. Perf 4626-36' w/1 JSF,
4. Run Plastic Lined Tbg with Packer, Packer To Be Set AT \pm 4540'
5. Well To Be Placed on Injection.

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

SIGNED Wanda A. Rutherford	TITLE Admin. Supv.	DATE 2-2-77
APPROVED BY John Jones	TITLE Operator	DATE FEB 4 1977
CONDITIONS OF APPROVAL, IF ANY: NM OCC-4, Partners-15 File		