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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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Sam D. Ares		8. Farm or Lease Name B. Davis
3. Address of Operator c/o Oil Reports & Gas Services, Box 763, Hobbs, New Mexico		9. Well No. 1
4. Location of Well UNIT LETTER L , 1650 FEET FROM THE South LINE AND 330 FEET FROM THE West LINE, SECTION 34 TOWNSHIP 23 S RANGE 36 E NMPM.		10. Field and Pool, or Wildcat Jalmat
15. Elevation (Show whether DF, RT, GR, etc.) 3403		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 CPNS. <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 Re-enter & Complete <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 1103.

Re-entered 2/24/69. Drilled out surface plug and circulated hole clean to top of cement plug at 3525. Perforated 5 1/2" casing 3520-22 with 4 shots per foot and acidized with 500 gallons 15% regular acid. Ran swab, well kicked off flowing.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED H. L. Smith	TITLE Agent	DATE 2/27/69
APPROVED BY [Signature]	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		