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NEW MEXICO OIL CONSERVATION COMMISSION
3-NMOCC
1-File

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 GEARTY OIL COMPANY	8. Farm or Lease Name G. D. RIGGS B
3. Address of Operator P.O. BOX 249, HOBBS, NEW MEXICO 88240	9. Well No. 4
4. Location of Well UNIT LETTER B , 660 FEET FROM THE North LINE AND 1980 FEET FROM THE EAST LINE, SECTION 1 TOWNSHIP 26 S RANGE 37 E N.M.P.M.	10. Field and Pool, or Wildcat LANGLIE MATTIX
15. Elevation (Show whether DF, RT, GR, etc.)	12. County LEA

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"/>	SHUT WELL IN <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.

WELL UNECONOMICAL TO PRODUCE. WELL SHUT IN PENDING STUDY OF WATERFLOOD POSSIBILITIES.

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

Original Signed By
C. L. WADE

SIGNED _____ TITLE **AREA SUPERINTENDENT** DATE **APRIL 22, 1970**

SUPERVISOR DISTRICT

APR 28 1970

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 27 1970

**OIL CONSERVATION COMM.
DOBB, N. H.**

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