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OPERATOR		

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease

State ☐   Fee ☒

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 ☒   GAS WELL ☐   OTHER-

7. Unit Agreement Name

2. Name of Operator

Bronco Oil Corporation

8. Farm or Lease Name

Saltmount

3. Address of Operator

P. O. Box 5114, Midland, Texas

9. Well No.

2

4. Location of Well

UNIT LETTER ___O___ , ___660___ FEET FROM THE ___South___ LINE AND ___1980___ FEET FROM

THE ___East___ LINE, SECTION ___21___ TOWNSHIP ___23-S___ RANGE ___37-E___ NMPM.

10. Field and Pool, or Wildcat

Undesignated

15. Elevation (Show whether DF, RT, GR, etc.)

3303 GL

12. County

Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

OTHER _____ ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOB ☒

OTHER _____

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

☐

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.

9-17-67 Reached TD 1069'   Set 9-5/8" OD 8rd thread, 32.3#, H-40, ST&C R-2 casing at 1066'.   Cemented with 460 sx. neat Incor cement, 1.0% CaCl$_2$, 100% excess cement.   Cement lacked 92' circulation.   Ran 1" pipe down beside surface pipe and cemented back to surface.   Tested to 1000# for 30 min. Held OK.   WOC 18 hrs.

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

SIGNED _____   TITLE ___Vice President___   DATE ___19 January 1968___

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: