	NEW MEXICO OIL CONSE	WELLS	Form C-103 Supersedes Old C-102 and C-103 Effective 1-1-65  5a. Indicate Type of State  5. State Oll & Gas L	Fee Rose No.
1. GAS WELL WELL	OTHER-		7. Unit Agreement N	ıme
2. Name of Operator	OTHER		8. Farm or Lease Na	me
3. Address of Operator	oy.		9. Well No	<b> </b>
P.O. Box 5596 M	Idland, Texas,	7970/	10. Field and Pool,	or Wildcat .
4. Location of Well UNIT LETTER			Cline (Abo. L	Irinkard)
THE East LINE, SECTION_		RANGE <b>R.37.E</b> NM	PM.	
	15. Elevation (Show whether I	)F, RT, GR, etc.)	12. County	
16. Charle Apr	oropriate Box To Indicate No	ature of Notice Report of (	Other Data	77777777
re-complete the	change plans  tions (Clearly state all pertinent deta  about done in 19	172. It is our producing	ing estimated date of star	ABANDONMENT
19 the Dinkar	d and Abo pro	nducing horizons	(6874 - 642)	)-
			DATE	
	ove is true and complete to the best o			<b>3</b> -77

Ex. Jules 5/31/78