

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

# 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.	

## 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> <i>Dry hole</i>		7. Unit Agreement Name <i>Bell Lake</i>
2. Name of Operator <i>Continental Oil Company</i>		8. Farm or Lease Name <i>Bell Lake Unit</i>
3. Address of Operator <i>P. O. Box 460, Hobbs, NM 88240</i>		9. Well No. <i>13</i>
4. Location of Well UNIT LETTER <i>H</i> <i>1980'</i> FEET FROM THE <i>North</i> LINE AND <i>660</i> FEET FROM THE <i>East</i> LINE, SECTION <i>6</i> TOWNSHIP <i>24S</i> RANGE <i>34E</i> NMPM.		10. Field and Pool, or Wildcat <i>Bell Lake Bone Springs</i>
15. Elevation (Show whether DF, RT, GR, etc.)		12. County <i>Lea</i>

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 ☐  
OTHER ☐

PLUG AND ABANDON ☒  
CHANGE PLANS ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOBS ☐  
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.

*It is proposed to P&A this well by the following procedures: Set 250 socks cement from 3120' to 2970'; 50 socks from 1320' to 1220'. Set 10' cement surface plug. Erect dry hole marker and restore location for inspection.*

*Note: no casing will be pulled in this well.*

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

SIGNED *[Signature]* TITLE *Sr Analyst* DATE *6-26-73*

APPROVED BY *Joe D. Ramey*  
Orig. Signed by  
DATE *10/1/73*  
CONDITIONS OF APPROVAL, IF ANY *Dist. 1, Supv.*

NMOC-4 FILE