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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.	
LG - 3340	
7. Unit Agreement Name	
Undesignated	
8. Farm or Lease Name	
American Eagle	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
Comanche Stateline	
Tansil Yates	
12. County	
Lea	

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"/>
2. Name of Operator
Gifford, Mitchell & Wisenbaker
3. Address of Operator
1280 Midland National Bank Tower, Midland, Texas 79701
4. Location of Well
UNIT LETTER <u>M</u> , <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM
THE <u>West</u> LINE, SECTION <u>22</u> TOWNSHIP <u>26-S</u> RANGE <u>36-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
2902 GL

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPYS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input 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.	

2-2-81

Set 5-1/2" 14# K-55 casing at 3550' and cemented with 550 sxs of Class "C" cement with 2% CaCl and 3# salt per sx mixed at 14.3 ppg. WOC 60 hours, tested pipe at 1200 psi for 30 minutes; held OK.

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

SIGNED D. B. Gifford TITLE Production Manager DATE 2-9-81

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: