| NO. OF COPIES RECEIVED | | LORDC OF | Form C-103 |
|---|---|--|--|
| DISTRIBUTION | —————————————————————————————————————— | | FICE OSpecedes Old C-102 and C-103 |
| SANTA FE FILE | NEW MEXICO OIL C | ONSERVATION COMMISSION | Effective 1-1-65 |
| U.S.G.S. | 3-M1000 | Jun 27 (| 5a. Indicate Type of Lease |
| LAND OFFICE | l-File | | State Fee |
| OPERATOR | | | 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.) | | | |
| OIL GAS WELL WELL | OTHER- | | 7. Unit Agreement Name |
| 2. Name of Operator | er Oll Coupeny | | 8. Farm or Lease Name |
| 3. Address of Operator | ox 249, Hobbs, New Ment | eo 88240 | 9. Well No. |
| 4. Location of Well | | | 10. Field and Pool, or Wildcat |
| UNIT LETTER | 220 | | |
| ,,,,,,,,,, | | ATT LINE AND 330 FEET F | ROM METERS |
| THE West LINE, SE | CTION 25 TOWNSHIP 24 | 8RANGENM | IPM. |
| | 15. Elevation (Show whe | ether DF, RT, GR, etc.) | 12, County |
| 16. | h Annuali e B. T. V. | | |
| Unec. | K Appropriate Box To Indicat | te Nature of Notice, Report or | |
| NOTICE OF | THE ENTION TO: | SUBSEQUE | ENT REPORT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | Ai |
| TEMPORARILY ABANDON | | COMMENCE DRILLING OPNS. | ALTERING CASING PLUG AND ABANDONMENT |
| PULL OR ALTER CASING | CHANGE PLANS | CASING TEST AND CEMENT JOS | FEGG AND ABANDONMENT |
| | | OTHER | |
| OTHER | | L_J | |
| 17. Describe Proposed or Completed work) SEE RULE 1103. | Operations (Clearly state all pertinent | details, and give pertinent dates inclu- | ling estimated date of starting any proposed |
| Well shut in p | ending study of remedia | l possibilities. | |
| ORIGINAL SIGN HAROLD G. VES | | est of my knowledge and belief. | 6-20-67 |
| | · · | | age to the |

CONDITIONS OF APPROVAL, IF ANY:

| NO. OF COPIES RECEIVED | | |
|--|--|---|
| DISTRIBUTION | _ | Form C-103 |
| SANTA FE | HOBBS OFFICE C. C. C | Supersedes Old C-102 and C-103 |
| FILE | MEW MEXICO OIL CONSERVATION COMMISSION | Effective 1-1-65 |
| U.S.G.S. | APR 6 9 45 AM 1 | |
| LAND OFFICE | | 5a, Indicate Type of Lease |
| OPERATOR | | State Fee. |
| OPERATOR | | 5. State Oil & Gas Lease No. |
| C. 1) | | |
| SUNI | DRY NOTICES AND REPORTS ON WELLS PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. EATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) | |
| USE "APPLIC | ATION FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.) | |
| OIL GAS WELL WELL | | 7. Unit Agreement Name |
| 2. Name of Operator | OTHER- | |
| Pidenator C | N.S. Comovine | 8. Farm or Lease Name |
| 3. Address of Operator | read weary figures. | Fowler Hair |
| - | 49, Holde, War Mortoo | 9. Well No. |
| 4. Location of Well | The mande and morning | 1 |
| 4. Location of well | 230 111 | 10. Field and Pool, or Wildcat |
| UNIT LETTER, | 2310 FEET FROM THE BOPTON LINE AND STEET | FROM Lenglie Mattix |
| W | / - WELL | |
| THELINE, SEC | TION 25 TOWNSHIP 24-6 RANGE 37-8 | |
| | | имрм. |
| | 15. Elevation (Show whether DF, RT, GR, etc.) | 12. County |
| | | Lea (\\\\\\\ |
| Check | Appropriate Box To Indicate Nature of Notice, Report o | or Other Data |
| NOTICE OF | INTENTION TO: SUBSEQUE | UENT REPORT OF: |
| | 0000140 | DENT REPORT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL WORK |] |
| TEMPORARILY ABANDON | COMMENCE DRILLING OPNS. | ALTERING CASING |
| PULL OR ALTER CASING | CHANGE PLANS CASING TEST AND CEMENT JOB | PLUG AND ABANDONMENT |
| | OTHER |] |
| OTHER | | X |
| 12 December 2 | | |
| work) SEE RULE 1103. | Operations (Clearly state all pertinent details, and give pertinent dates, incl | uding estimated date of starting any proposed |
| | | |
| | | |
| | | |
| | | |
| Well sl | but in pending study of remedial possibilities | |
| | The second of second in se | • |
| | | |
| | | |
| | | |
| | | ** |
| | NOTIFY | |
| | | |
| | POTENTIAL PROPERTY OF THE PROP | |
| | | |
| • | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 8. I hereby certify that the information | n above is true and complete to the best of my knowledge and belief. | |
| Original Si | and complete to the best of my knowledge and belief. | |
| C T W | Z A T) TO | |
| IGNED U. L. W | TITLE AFGA Supt. | bate 4-4-66 |
| | | |

CONDITIONS OF APPROVAL, IF ANY:

| NO. OF COPIES RECEIVED | | _ |
|---------------------------------------|--|---|
| DISTRIBUTION | | Form C-103 Supersedes Old |
| SANTA FE | NEW MEXICO OIL CONSTRUCTION CONTROL | C-102 and C-103 |
| FILE | NEW MEXICO OIL CONSERVATION COMMISSION | Effective 1-1-65 |
| U.S.G.S. | 2.000 | |
| LAND OFFICE | 3-000 Nov 12 11 24-22 | 5a. Indicate Type of Lease |
| OPERATOR | 1-File Nov 2 09 AM '6 | State Fee. |
| OFERATOR | | 5. State Oil & Gas Lease No. |
| | | |
| DO NOT USE THIS FORM FOR | DRY NOTICES AND REPORTS ON WELLS PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR CATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) | |
| USE "APPLI | CATION FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.) | |
| OIL GAS | | 7. Unit Agreement Name |
| Name of Operator | OTHER- | |
| • | | 8. Farm or Lease Name |
| 'ildevate | r Oil Company | Fowler Hair |
| . Address of Operator | | 9. Well No. |
| Box 249, | Hobbs, New Mexico | 1 |
| Location of Well | 97 | 10. Field and Pool, or Wildcat |
| UNIT LETTER M | 2310 FEET FROM THE WORTH | |
| | | Langlie Mattix |
| THE 31 | TION 25 TOWNSHIP 24-S 37-E | |
| LINE, SEC | TION 25 TOWNSHIP 24-S RANGE 37-E | _ NMPM: (())()()()()()()()()()()()()()()()()() |
| | 15. Elevation (Show whether DF, RT, GR, etc.) | |
| | All the state of t | 12. County |
| Clarati | A. T. T. III | Lea |
| NOTICE | k Appropriate Box To Indicate Nature of Notice, Repor | t or Other Data |
| NOTICE OF | INTENTION TO: SUBSE | EQUENT REPORT OF: |
| NEDECO | <u>_</u> | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL WORK | ALTERING CASING |
| EMPORARILY ABANDON | COMMENCE DRILLING OPNS. | PLUG AND ABANDONMENT |
| ULL OR ALTER CASING | CHANGE PLANS CASING TEST AND CEMENT JOB | AND ABARDORMEN! |
| | OTHER | X |
| OTHER | | <u> </u> |
| 7 Describe Proposed of Completed | | |
| work) SEE RULE 1103. | Operations (Clearly state all pertinent details, and give pertinent dates, i | including estimated date of starting any proposed |
| | | |
| | | |
| in | | |
| | ng study of remedial possibilities. | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| I hereby certify that the information | n above is true and complete to the best of my knowledge and belief. | |
| Original Sign | above is true and complete to the best of my knowledge and taller | |
| | and Bu | |
| | ed By | |
| C. L. WAD | ed By | DATE 11-10-65 |
| WAD WAD | ed By | |
| | ed By TITLE Area Supt. | |
| ROVED BY | ed By | DATE 11-10-65 |

CONDITIONS OF APPROVAL, IF ANY: