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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION BOARD OFFICE D. C. C.

APR 15 11 35 AM '66

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Name of Lease Name	
9. Well No.	
10. Field and Pool, or Wildcat	
12. County	

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> T.A.	7. Unit Agreement Name
2. Name of Operator	8. Name of Lease Name
3. Address of Operator	9. Well No.
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER J , 1980 FEET FROM THE East LINE AND 1980 FEET FROM THE South LINE, SECTION 34 TOWNSHIP 24S RANGE 37E N.M.P.M.	12. County
15. Elevation (Show whether DF, RT, GR, etc.)	

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 OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER T.A. <input checked="" 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.

FOR RECORD ONLY: To advise this well is still closed in and temporarily abandoned with no other plans at this time.

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

SIGNED <u>D.C. Caspe</u>	TITLE <u>District Superintendent</u>	DATE <u>4-14-66</u>
APPROVED BY <u></u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		