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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 type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. State Oil & Gas Lease No. | |
| 7. Unit Agreement Name | |
| 8. Farm or Lease Name Hodges B | |
| 9. Well No. 3 | |
| 10. Field and Pool, or Wildcat Justis-Blinebry | |
| 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 CITIES SERVICE OIL COMPANY |
| 3. Address of Operator P.O. Box 69, Hobbs, N.M. 88240 |
| 4. Location of Well UNIT LETTER L , 1880 FEET FROM THE South LINE AND 330 FEET FROM THE West LINE, SECTION 1 , TOWNSHIP 25S , RANGE 37E NMPM. |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3118' GR |

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"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input checked="" type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER <input type="checkbox"/> | CASING TEST AND CEMENT JOB <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.

Prior approval to plug and abandon this triple completed well.

We propose to recompleate the Blinebry Zone with perforations @ 5082--5594.

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

SIGNED _____ TITLE **Dist. Admin. Supervisor** DATE **2-8-72**

APPROVED BY **Joe D. Ramey** TITLE _____ DATE **FEB 9 1972**
CONDITIONS OF APPROVAL, IF ANY: **Dist. I, Supv.**

RELEASED

FEB 11 1972

OIL CONSERVATION COMM.
HOBBES, R. 11

48-1-1
V-1-1