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NEW MEXICO OIL CONSERVATION COMMISSION

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

<p align="center">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.)</p>		<p>5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/></p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/></p>		<p>5. State Oil & Gas Lease No.</p>
<p>2. Name of Operator Texas Pacific Oil Company</p>		<p>7. Unit Agreement Name</p>
<p>3. Address of Operator Post Office Box 1069 - Hobbs, New Mexico 88240</p>		<p>8. Farm or Lease Name Eaton S. W.</p>
<p>4. Location of Well UNIT LETTER M 660 FEET FROM THE S LINE AND 660 FEET FROM THE W LINE, SECTION 12 TOWNSHIP 25-S RANGE 37-E NMPM.</p>		<p>9. Well No. 1</p>
<p>15. Elevation (Show whether DF, RT, GR, etc.) 3107' DF</p>		<p>10. Field and Pool, or Wildcat Langlie Mattix</p>
		<p>12. County Lea</p>

16. 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 JOB ☐
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.

1. Move in, rig up. Pull tubing & rods.
2. C. O. to TD & log well 2350-3457' (TD)
3. Perf. additional zone in Seven-Rivers Queen 3216-23, 36, 46, 53, 81, 86-3313-52 & 70'.
4. Run tbg. & packer set @ 3204'.
5. Acidize w/3,000 gal. acid.
6. Swab & test.

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

Original Signed by
SIGNED Sheldon Ward TITLE Area Superintendant DATE 2-25-69
APPROVED BY [Signature] TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: