| DISTRIBUTION SANTA FE | Hon. | |
|---|--|---|
| DISTRIBUTION | | Form C-103 |
| | "1988S OFF | Supersedes Old C-102 and C-103 Effective 1-1-65 |
| | NEW MEXICO OIL CONSERVATION COMMISSION | EEGequive 1-1-65 |
| FILE | JUN 4 3 n | |
| U.S.G.S. | 3 4 | a. Indicate Type of Lease |
| LAND OFFICE | | State B Fee. |
| | | 5, State Oil & Gas Lease No. |
| OPERATOR | | |
| | HOSE AND DEPORTS ON WELLS | |
| SUNDRY NO I | ICES AND REPORTS ON WELLS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) | |
| | PERMIT -" (FORM C-101) FOR SUCH PROPUSALS.) | 7. Unit Agreement Name |
| l. OIL GAS | | |
| WELL WELL OTH | ER- | 8. Farm or Lease Name |
| 2. Name of Operator | | Harner 9, Well No. |
| TEXAS PACIFIC OIL COMPANY | | |
| 3. Address of Operator | | |
| P. O. Box 1069 - Hobbs, Ne | w Mexico | 10. Field and Pool, or Wildcat |
| 4. Location of Well | | |
| UNIT LETTER 0 . 660 | FEET FROM THE SOUTH LINE AND 1980 FEET FROM | Jalmak |
| ONII LEITER | | |
| THE Rast LINE. SECTION | 20 TOWNSHIP 25-8 RANGE 37-8 NMPM. | |
| THELINE, SECTION | TOWNSHIP | |
| | 15. Elevation (Show whether DF, RT, GR, etc.) | 12. County |
| | 3043' GR | Ing (IIIIIII |
| | | her Data |
| | priate Box To Indicate Nature of Notice, Report or Otl | REPORT OF: |
| NOTICE OF INTENT | TION TO: | REPORT OF. |
| <u></u> | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANDON | COMMENCE DRILLING OPNS. | PLUG AND ABANDONMENT |
| PULL OR ALTER CASING | CHANGE PLANS CASING TEST AND CEMENT JOB | |
| | OTHERTemporal | rily Abendoned X |
| OTHER | | |
| | | |
| Describe Proposed or Completed Operation: work) SEE RULE 1103. | s (Clearly state all pertinent details, and give pertinent dates, including | estimated date of starting any proposed |
| Abovd well was tempo | orarily abandoned 6-1-68. | |
| | | |
| 18. I hereby certify that the information above Original Signed by Sheldon Ward APPROVED BY CONDITIONS OF APPROVAL, IF ANALY | is true and complete to the best of my knowledge and belief. TITLE Area Superintendent | DATE |