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NEW MEXICO OIL CONSERVATION COMMISSION

3cc: NMOCC

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

5a. Indicate Type of Lease

State ☐ Fee ☒

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.)

|   |  |
|---|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> (Triple Compl.)  | 7. Unit Agreement Name   |
| 2. Name of Operator<br><b>TIDEWATER OIL COMPANY</b>   | 8. Farm or Lease Name<br><b>A. B. Coates "C"</b>                       |
| 3. Address of Operator<br><b>P. O. Box 249, Hobbs, New Mexico 88240</b>   | 9. Well No.<br><b>21</b>   |
| 4. Location of Well<br>UNIT LETTER <b>J</b> FEET FROM THE <b>2080</b> South LINE AND <b>1980</b> FEET FROM<br>THE <b>East</b> LINE, SECTION <b>24</b> TOWNSHIP <b>25-S</b> RANGE <b>37-E</b> N.M.P.M. | 10. Field and Pool, or Wildcat<br><b>Justis, Montoya, McKee, Blinn</b> |
| 15. Elevation (Show whether DF, RT, GR, etc.)   | 12. County<br><b>Lea</b>   |

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐

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.

**Packer leakage test indicated communication. We propose to kill well, pull tubing, locate and repair leak.**

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

Original Signed By

SIGNED **C. L. WADE**

TITLE **Area Superintendent**

DATE **4-1-67**

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: