NO. OF COPIES RECEIVED	
	Form C-103
	Supersedes Old C-102 and C-103
SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE	
U.S.G.S. Orig&2cc: OCC, Hobb UCN. 4. 9 22 AM 367	5a. Indicate Type of Lease
LAND OFFICE cc: Regional Office	State Fee X
OPERATOR CC: Mrs. M.M. Rhea, Santa Fe, N.I	
cc: file	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVO USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
USE "APPLICATION FOR PERMIT _*" (FORM C-101) FOR SUCH PROPOSALS.)	
	7. Unit Agreement Name
WELL WELL OTHER.	J. T. Lanehart Com.
	8. Farm or Lease Name
Sinclair Oil & Gas Company atlante Sichfull	Call
, Address of Operator	9. Well No.
P. O. Box 1920, Hobbs, New Mexico 88240	1
. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER F 1650 FEET FROM THE North LINE AND 1650	Tot There and Tool, of whitedt
UNIT LETTER, 1070 FEET FROM THE LINE AND LO2U	FEET FROM
West 20 org	
THE West LINE, SECTION 28 TOWNSHIP 25S RANGE 37E	NМРМ. (()))))))))))))))))))))))))))))))))))
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	Lea
6. Check Appropriate Box To Indicate Nature of Notice, Repo	ant on Other Date
SUB:	SEQUENT REPORT OF:
	<u></u>
PERFORM REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING L. CHANGE PLANS CASING TEST AND CEMENT JO	)B
0THER	
0THER	
7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates work) SEE RULE 1103.	, including estimated date of starting any proposed
7-25-67 Spotted 25 sks. cement plug across Abo perforations 69 heavy mud. Shot 7"OD casing off @ 5000' and pulled 50 plug in top of 7"OD casing stubb @ 5000' and plugged o @ 5079'). Spotted 25 sacks cement plug across base of 10 sacks cement plug in 13-3/8"OD surface casing (28' cleaned and levelled location. Plugged and abandoned e	00'. Spot 25 sacks cement ff Glorietta. (Glorietta Top 9-5/8"OD casing @ 3650'. Spott to 0'). Set regulation marker
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. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	• • •
$\pm 0.13$	
F. A. Superintendent	7-31-67
FAD Superintement	7-31-67
F. A. Superintendent	DATE
SNED TITLE Superintendent	DATE
B. I hereby certify that the information above is true and complete to the best of my knowledge and belief. CARED	7-31-67 AUG 1 1 1970