NO. OF COPIES RECEIVED	*)	Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		
U.S.G.S.	•	out indicate Type of Lease
LAND OFFICE		State Fee.
OPERATOR		5. State Oil & Gas Lease No.
CHAIDD	NA MOTICES AND DEPORTS ON WELLS	NMJ-584
OUNDE (DO NOT USE THIS FORM FOR PRO HISF "APPLICAT	Y NOTICES AND REPORTS ON WELLS POSSALS TO BRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. 10 N FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	
1.	TOWN CONTROL (CONTROL SOCIA PROPOSALS.)	7. Unit Agreement Name
OIL GAS WELL X	OTHER-	
2. Name of Operator		8. Farm or Lease Name
TEXAS PACIFIC OIL CO	MPANY	Jenkins
3. Address of Operator		9. Well No.
P. O. Box 1969 - Hebbs, New Mexico 88240		2
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER,	1980 FEET FROM THE South LINE AND 1980 FEE	TAIMAT Yates Gas
THE West LINE, SECTION	ON 29 TOWNSHIP 25-8 RANGE 37-8	_NMPM. ()
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
		12. County
16. Check	Appropriate Boy To Indicate Nature of Nation B	
NOTICE OF IN	Appropriate Box To Indicate Nature of Notice, Report	
	SOBSEC	QUENT REPORT OF:
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	
	OTHER	
OTHER		
17. Describe Proposed or Completed Op	erations (Clearly state all pertinent details, and give pertinent dates, in	aludian assimas di desarta di di
work) SEE RULE 1103.	and give personal dates, in	cruting estimated date of starting any proposed
Upon approval we proj	page the following.	
abou abbioset as biol	hose the tottowing:	
1. Rig up. Kill wel	ll, Pull rods, pump and tubing.	
2. Run bridge plug a	at 2865 and cap with 3 sks. cement on top.	
3. Perforate Yates	interval with 3/8" shot at 2642,61,80,2706,2	7 46 GE 2019 c 4E!
4. Run tubing and pa	acker at apprx. 2500'. Spot 500 gal. 15% NI	1,00,73,2010 & 43'.
5. Acidize w/1000 ga	al. 15% NE acid.	acta over betts.
6. Frac w/10,000 gal	. prepared brine / 10,000# 20/40 sand.	
7. Pull tubing & pac	cker. Run tubing, swab back load and test.	
_		
18. I hereby certify that the information	above is true and complete to the best of my knowledge and belief.	
Outsing 1 Stamp 3 to	77	
Original Signed by	Y TITLE Area Superintendent	DATE 1-15-69
Sheldon Ward		DATE
1 / mot 1		
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY		