| NO. OF COPIES RECEIVED | | | Form C-103 |
|---|--|------------------|---|
| DISTRIBUTION | | | Supersedes Old |
| SANTA FE | NEW MEXICO OIL CONSERVATION COMMIS | SION 1.01 | C-102 and C-103 |
| FILE | | HUE | BS (Fifective dies. C. |
| U.S.G.S. | | L. # | Sa. Indicate Type of Lease |
| LAND OFFICE | | May | 3 Sate AM DD Fee X |
| OPERATOR | | | 5. State Oil & Gas Lease No. |
| | | | |
| SUN (DO NOT USE THIS FORM FOR | DRY NOTICES AND REPORTS ON WELLS PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RE- CATION FOR PERMIT _" (FORM C-101) FOR SUCH PROPOSALS.) | SERVOIR. | |
| 1. OIL GAS GAS | | | 7. Unit Agreement Name |
| 2. Name of Operator | OTHER. | | |
| TEXAS PACIFIC OIL CO | MPANY | | 8. Farm or Lease Name Winningham |
| 3. Address of Operator | | | 9. Well No. |
| P.O. Box 1069 - Hebb | s, New Mexico | | 7 |
| 4. Location of Well | | | 10. Field and Pool, or Wildcat |
| UNIT LETTER,_ | 1922 FEET FROM THE North LINE AND 4 | BB FEET FROM | Langlie Mattix |
| THELINE, SE | CTION 30 TOWNSHIP 25-S RANGE 3 | 7-E | |
| | | ММРМ | |
| | 15, Elevation (Show whether DF, RT, GR, etc.) | | 12. County |
| | 3015° GL | | Lea |
| Chec | k Appropriate Box To Indicate Nature of Notice, | Report or Or | her Data |
| NOTICE OF | · INITENTION TO | | T REPORT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL WORK | | |
| TEMPORARILY ABANDON | | H | ALTERING CASING |
| PULL OR ALTER CASING | COMMENCE DRILLING O CHANGE PLANS CASING TEST AND CEM | — | PLUG AND ABANDONMENT |
| _ | | TEMPORAR | ILY ABANDONED K |
| OTHER | | | |
| | | | |
| work) SEE RULE 1103. | Operations (Clearly state all pertinent details, and give pertinent | dates, including | estimated date of starting any proposed |
| | | | |
| WETT BOD DOGGTTTE OF | PANTAL TO THE PARTAL TO THE PA | | |
| HELD FOR POSSIBLE SEC | CONDARY RECOVERY. | | |
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| 18. I hereby certify that the informati | on above is true and complete to the best of my knowledge and bel | ief. | |
| SIGNED Original signed by | : Sheldon Ward | 3a4 | |
| SIGNED | : Sheldon Ward TITLE Area Superintens | ient | |

CONDITIONS OF APPROVAL, IF ANY: