DISTRIBUTION SANTA FE		Form C-103
SANTA FE		Supersedes Old
	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		211001146 1-1-03
U.S.G.S.	Nov 15 0	5a. Indicate Type of Lease
LAND OFFICE	Nov 15 8 38 AM .	State Fee.
OPERATOR		5. State Oil & Gas Lease No.
SU (DO NOT USE THIS FORM FOR USE "APP	INDRY NOTICES AND REPORTS ON WELLS OR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. LICATION FOR PERMIT -'' (FORM C-101) FOR SUCH PROPOSALS.)	
OIL GAS WELL WELL	OTHER-	7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
TEXAS PACIFIC OIL	COMPANY	
3. Address of Operator	VWILLIAM I	9. Well No.
P. O. Box 1069; He	obbs, New Mexico	1
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER B	330 FEET FROM THE NORTH LINE AND 2310 FEET FROM	Jalmat
THE CAST LINE, S	SECTION 31 TOWNSHIP 25-S RANGE 37-E NMPM.	
mmmmm		
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
16.	3002 G.L.	Lea
Che	ck Appropriate Box To Indicate Nature of Notice, Report or Oth	er Data
NOTICE O	F INTENTION TO: SUBSEQUENT	REPORT OF:
		KE OKT OT.
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL CR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	THE THE STATE OF T
	OTHER TEMPORARILY ABA	NDONED
OTHER		
17. Describe Proposed or Complete	ed Operations (Clearly state all pertinent details, and give pertinent dates, including	
wormy dee Note 1103.	,	serimeted date of starting any proposea
HELD FOR POSSIBLE	PEMEDIAI LIODU AND GEGONDADU DEGONDADO	
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	REMEDIAL WORK AND SECONDARY RECOVERY.	
8. I hereby certify that the informa	tion above is true and complete to the best of my knowledge and belief.	
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8. I hereby certify that the informa	tion above is true and complete to the best of my knowledge and belief.	DATE 11-10-65
8. I hereby certify that the informa	tion above is true and complete to the best of my knowledge and belief.	DATE 11-10-65

CONDITIONS OF APPROVAL, IF ANY: