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NO. OF COPIES RECEIVED		Form C-103	
DISTRIBUTION	HOBES OFFICE O.C.C.	Supersedes Old	
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103	
FILE		Effective 1-1-65	
U.S.G.S.	DEC 9 11 45 AM '65	5a. Indicate Type of Lease	
LAND OFFICE	7	State Fee X	
OPERATOR	1	5. State Oil & Gas Lease No.	
		of state on a day heave No.	
	RY NOTICES AND REPORTS ON WELLS OPOSALS TO DRILL OR TO DEEPEN OF PLUE BACK TO A DIFFERENT RESERVOIR. FION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.)		
l. OIL X GAS WELL X	OTHER-	7. Unit Agreement Name	
2. Name of Operator		8. Farm or Lease Name	
Humble Oil & Refining Co.		1	
3. Address of Operator		J.A.E. Knight	
Box 2100, Hobbs, New Mexico		3. ************************************	
A Location of Wall		10. Field and Pool, or Wildcat	
UNIT LETTER	2080 FEET FROM THE ERST LINE AND 1880 FEET FROM	Fowler Blinebry	
1	FEET FROM	TOWIER DITHEBY	
South	ON 23 YOWNSHIP 24S RANGE 37E NMPM.		
LIKE, SECT	ON TOWNSHIP LIO RANGE SIE NMPM.		
	12. County		
11111111111111111111111111111111111111		Lea	
16. Check	The Branch and the Comment of the Co		
NOTICE OF I	Appropriate Box To Indicate Nature of Notice, Report or Oth		
	SUBSEQUENT	REPORT OF:	
PERFORM REMEDIAL WORK	PLUS AND ABANDON REMEDIAL WORK		
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASING	
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT	
	OTHER		
OTHER	· ·		
	L.		

- 17. Describe Proposed or Completed Operations (Clearly coase all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.
 - 1. Unseat packer and pull tubing.
 - 2. Frac the Blinebry perforations in 4-1/2-inch casing with 20,000 gallons of gelled lease oil with 1 pound sand per gallon.

 3. Run tubing and packer, set packer at 5330 feet.

 4. Swab well in and test.

 - 5. Run flowmeter to determine producing perforations.

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18. I hereby certify that the information above is true a	and complete to the best of my knowledge and ballet			
	and belief.			****
SIGNED CONTRACTOR	TITLE Dist. Adm. Supvr.	DATE	12 - 6-65.	
/mcb				
APPROVED BY	TITLE			
CONDITIONS OF APPROVAL, IF ANY:				
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