

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection	7. Unit Agreement Name
2. Name of Operator George L. Buckles Company	8. Farm or Lease Name Humphrey "A"
3. Address of Operator P. O. Box 56 - Monahans, Texas 79756	9. Well No. 9
4. Location of Well UNIT LETTER O , 1980 FEET FROM THE E LINE AND 100 FEET FROM THE S LINE, SECTION 3 TOWNSHIP 25-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Langille-Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3134 GR	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

October 15, 1968 Spudded

October 22, 1968 Drilled to 732' with cable tool rig. Set 727.15' of 23 lb. 8-5/8" casing. Cementing Affidavit attached.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED John A. Bates (John A. Bates) TITLE Office Manager DATE November 6, 1968

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT DATE NOV 8 1968

CONDITIONS OF APPROVAL, IF ANY: