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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.	
NEW 539	

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Texas Pacific Oil Company, Inc.	8. Farm or Lease Name Laton, N.E.
3. Address of Operator P. O. Box 4067, Midland, Texas 79701	9. Well No. 13
4. Location of Well UNIT LETTER B, 880 FEET FROM THE North LINE AND 2110 FEET FROM THE East LINE, SECTION 12 TOWNSHIP 25-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Justis
15. Elevation (Show whether DF, RT, GR, etc.) 3105.1' 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <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.

1. Drilled to T.D. 5750'. Logged Well.
2. Ran 137 Jts. (5795') 5 1/2" 14# K-55 casing set at 5750'.
3. Cemented w/450 sxs. TLW w/4% Gel + 300 sxs. Class C. Ran Temperature Survey T.C. at 2220'.
4. Moved off Rotary Rig.
5. Waiting on Completion Unit.

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

SIGNED Buddy J. Knight TITLE Dist. Drilling Coordinator DATE 9-19-74

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: