Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 30-025-27176

5. Indicate Type of Lease: Federal STATE ☐ FEE ☐

6. State Oil & Gas Lease No. NM 10183

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.)

7. Lease Name or Unit Agreement Name: McCLURE B

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Shut in ~~WATER INJECTION~~

2. Name of Operator: EARL R. BRUNO

8. Well No. 22

3. Address of Operator: P O Box 590 MIDLAND TEXAS 79702

9. Pool name or Wildcat: DOLLARHIDE QUEEN

4. Well Location
Unit Letter F : 1650 Feet From The SOUTH Line and 660 Feet From The EAST Line

Section 19 Township 24 S Range 38 E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3176 GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☒	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER:	☐			OTHER: CONVERT TO WATER ~~INJECTION~~ disposal	☐		

12. 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. Shut 4-2

1. PULLED RODS & TUBING
2. RAN BAKER AD 1 PACKER & 3700' 2 3/8" SALTA LINED TUBING. SET TOP OF PACKER @ 3647'
3. CIRCULATED FRESH WATER PACKER FLUID
4. PERFORMED CASING ENTEGRITY TEST

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

SIGNATURE J. E. Gray TITLE ENGINEER DATE 2/17/92

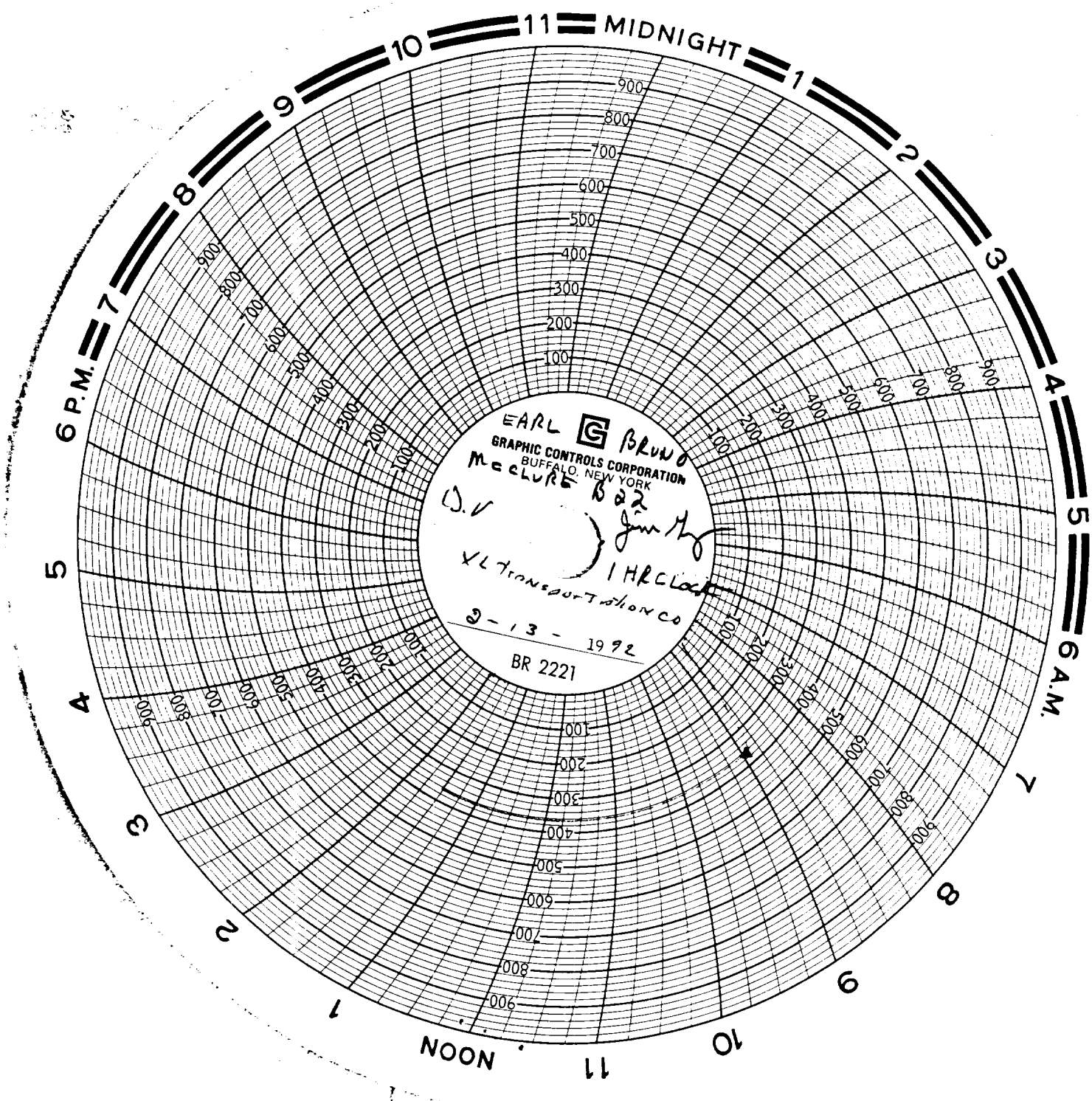
TYPE OR PRINT NAME J. E. GRAY TELEPHONE NO. 915-685-0113

(This space for State Use)

FOR RECORD ONLY

APPROVED BY _____ TITLE _____ DATE MAR 21

CONDITIONS OF APPROVAL, IF ANY:


MIDNIGHT
NOON
6 P.M.
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EARL BRUNO
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
McCLURE B22
D.V
1 HR Clock
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9 - 13 - 1992
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