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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 checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
LG 2422	

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 I. W. LOVELADY	8. Farm or Lease Name STATE
3. Address of Operator P. O. Drawer 2666, Midland, Texas 79701	9. Well No. 2
4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 32 TOWNSHIP 16 South RANGE 36 East NMPM.	10. Field and Pool, or Wildcat EAST SHOEBAR DEV.
15. Elevation (Show whether DF, RT, GR, etc.). 3920.2 GR	12. County LEA

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 checked="" type="checkbox"/> Intent to Drill	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

(Copy of your letter of 2/21/75 attached)

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.

BLOWOUT PREVENTER PROGRAM

Size of Hole	Casing Size	Setting Depth	Blowout Preventers
17-1/4"	13-3/8"	403'	Rotating Head
12-1/4"	8-5/8"	4400'	Double 1500 Series w/900 Series Hydrill

"BLOWOUT PREVENTERS WILL BE TESTED TO RATED CAPACITY ON INSTALLATION AND EVERY THIRTY (30) DAYS THEREAFTER WHILE ON THIS WELL".

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

SIGNED G. D. Files TITLE Production Supt. DATE 2-27-75

APPROVED BY Joe D. Files TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: