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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"/> Fed. <input checked="" type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No. SF 079115	
7. Unit Agreement Name	
8. Farm or Lease Name Tonkin	
9. Well No. 3	
10. Field and Pool, or Wildcat Kutz P.C. West	
12. County San Juan	

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 checked="" type="checkbox"/> OTHER-	2. Name of Operator Kennedy Oil Co., Inc.
3. Address of Operator P.O. Box 151 Artesia, N.M.	4. Location of Well UNIT LETTER C 990 FEET FROM THE N LINE AND 1650 FEET FROM THE W LINE, SECTION 13 TOWNSHIP 27N RANGE 12W NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 6049 DF	

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 Shut In <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input 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.

Propose to shut in this well on May 2, 1968, and maintain this status until such time as the line pressure of Southern Union is lowered enough for this well to be produced economically.

The production from this well for the year of 1967 was only 571 MCF.



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

SIGNED <u><i>Emery C. Arnold</i></u>	TITLE Vice Pres.	DATE 5/2/68
Original Signed by Emery C. Arnold	SUPERVISOR DIST. #3	MAY 3 - 1968
APPROVED BY	TITLE	DATE

CONDITIONS OF APPROVAL, IF ANY: