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NEW MEXICO OIL CONSERVATION COMMISSION

MAR 20 1975

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

J. C. C.
ARTESIA, OFFICE

5a. Indicate Type of Lease
State Fee
5. State Oil & Gas Lease No.
B-2721

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injection Well		7. Unit Agreement Name
2. Name of Operator Kennedy Oil Co., Inc.		8. Farm or Lease Name State C
3. Address of Operator Box 151 Artesia, New Mexico 88210		9. Well No. 2
4. Location of Well UNIT LETTER A 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 32 TOWNSHIP 16S RANGE 11E NMPM.		10. Field and Pool, or Wildcat Square Lake
15. Elevation (Show whether DF, RT, GR, etc.) 3953 DF		12. County ddy

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK
TEMPORARILY ABANDON
PULL OR ALTER CASING
OTHER

PLUG AND ABANDON
CHANGE PLANS

REMEDIAL WORK
COMMENCE DRILLING OPNS.
CASING TEST AND CEMENT JOB
OTHER
ALTERING CASING
PLUG AND ABANDONMENT

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

Plugged and abandoned as follows:

9/7/74 Set bridge plug @ 3150' and capped with 35' cement plug.
9/11/74 Cut 5/8" casing at 1070' and pulled same.
Ran tubing and placed heavy mud to 1120'.
Placed 100' cement plug at 5/8" pipe stub 1120'-1020'.
Placed 100' cement plug @ top of salt 600-700' mud between all plugs.
Placed surface plug, cleaned, cleared & leveled location.
Placed regulation marker.

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

SIGNED *J. C. C.*

TITLE Pres.

DATE 3/19/75

APPROVED BY *Susan Morris*

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: