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NEW MEXICO OIL CONSERVATION COMMISSION

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

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5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
6. State Oil & Gas Lease No. E-5668
7. Unit Agreement Name
8. Former Lease Name Tidewater State
9. Well No. 2
10. Field and Loc., or Wildcat Grayburg Jackson
12. County Eddy

SUNDRY NOTICES AND REPORTS ON WELLS APR 28 1979

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 ☐ GAS WELL ☐ OTHER- **C. C. C. ARTESIA, OFFICE**

2. Name of Operator
Kennedy Oil Co., Inc. ✓

3. Address of Operator
Box 151 Artesia, N.M.. 88210

4. Location of Well
UNIT LETTER L, 1980 FEET FROM THE South LINE AND 660 FEET FROM
THE West LINE, SECTION 2 TOWNSHIP 17s RANGE 31E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)

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"/> Casing Leak Survey	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent notes, including estimates of work) SEE RULE 1103.

The above well is valved in and ready for scheduled inspection.
Conventional Bradenhead

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

SIGNED <u>[Signature]</u>	TITLE <u>Clerk</u>	DATE <u>4-25-79</u>
APPROVED BY <u>B. W. Weaver</u>	TITLE <u>OIL AND GAS INSPECTOR</u>	DATE <u>MAY 15 1979</u>
CONDITIONS OF APPROVAL, IF ANY:		