

~~CORRECTED REPORT~~

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NEW MEXICO OIL CONSERVATION COMMISSION

NOV 24 1969

O. C. C.

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS FOR 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 Atoka San Andres Unit
2. Name of Operator Kewanee Oil Company	8. Farm or Lease Name Tract 2
3. Address of Operator P. O. Box 3786, Odessa, Texas 79760	9. Well No. 3
4. Location of Well UNIT LETTER P , 330 FEET FROM THE South LINE AND 330 FEET FROM THE East LINE, SECTION 10 TOWNSHIP 18S RANGE 26E NMPM.	10. Field and Pool, or Wildcat Atoka San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 3337' DF	12. County Eddy

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 ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER ☐

OTHER **Convert to Water Injection Well** ☒

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.

Pull rods and tubing, clean out to TD of 1754' and wash hole down with 250 gallons acid. Set tension packer at approximately 1500' on 2-3/8" O. D. tubing coated internally with plastic and load annulus with inhibited water. Start fresh water injection down tubing at rate of about 200 BPD. Injection will commence on or about 1-1-70.

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

SIGNED *[Signature]*

TITLE **Division Superintendent**

DATE **11-21-69**

APPROVED BY *W. A. Gressett*

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: