Form C-103

OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

Copy

MISCELLANEOUS REPORTS ON WELLS

Submit this report in triplicate to the Oil Conservation Commission or its proper agent within ten days after the work specified is completed. It should be signed and sworn to before a notary public for reports on beginning drilling operations, results of shooting well, results of test of casing shut-off, result of plugging of well, and other important operations, even though the work was witnessed by an agent of the Commission. Reports on minor operations need not be signed and sworn to before a notary public. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of report by checking below:

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL	X	REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL			

Artesia, New Mexico (Place) — June 6, 1945 (Date)

OIL CONSERVATION COMMISSION,
SANTA FE, NEW MEXICO.
Gentlemen:

Following is a report on the work done and the results obtained under the heading noted above at the Robert E. McKee (Company or Operator) State (Lease) Well No. 3 in the SW SE of Sec. 3, T. 19S, R. 29E, N. M. P. M., Turkey Track Field, Eddy County.

The dates of this work were as follows: June 5, 1945

Notice of intention to do the work was ~~(was not)~~ submitted on Form C-102 on May 15, 1945

and approval of the proposed plan was ~~(was not)~~ obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

After cleaning out this abandoned well to approximately 2643', we plugged back with 3 sax of cement to 2634', and with gravel to 2597', and shot with 250 quarts of SNG from 2547' to 2597', with no appreciable result.

Witnessed by ______ Name ______ Company ______ Title

Subscribed and sworn before me this ______

______ day of ______, 19____

______ Notary Public

My commission expires ______

I hereby swear or affirm that the information given above is true and correct.

Name ______

Position ______

Representing ______ Company or Operator

Address ______

Remarks: Approved: 6-12-45

______ Name

______ Title

5-15-45