

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088
RECEIVED

MAR 13 '89

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.)		WELL API NO.
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Kersey & Company		6. State Oil & Gas Lease No. E-5073
3. Address of Operator P.O. Box 316, Artesia, NM 88211-0316		7. Lease Name or Unit Agreement Name Northcott
4. Well Location Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line Section 24 Township 19S Range 28E NMPM Eddy County		8. Well No. 3
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3379' GL		9. Pool name or Wildcat Und. E. Millman QGBSA

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Make into an injection well <input checked="" type="checkbox"/>

12. 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.

This well was converted to an injection well effective February 1, 1989.
Administrative approval was obtained to effect this.
8" tension packer set on cement lined tubing at 1500'.

Post ID-2
3-24-89
Camp SWD

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

SIGNATURE James Kersey TITLE Owner DATE 3-10-89
TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

Original Signed By
Mike Williams

APPROVED BY _____ TITLE _____ DATE MAR 21 1989

CONDITIONS OF APPROVAL, IF ANY: