

Submit 3 Copies to Appropriate District Office	State of New Mex Energy, Minerals and Natural Re		V	Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATIO		WELL API NO.	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, NM 8		30-015-306  5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease N	ATE X FEE
SUMPRY NOT	ICES AND REPORTS ON WELL	9	008561 ////////////////////////////////////	
(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.)			7. Lease Name or Unit Agreement Name LOWE STATE	
1. Type of Well: OIL GAS WELL WELL WELL	OTHER	A 222		
2. Name of Operator		7	8. Well No.	
KERR-McGEE CORPORATION		JUN 1009	4	
3. Address of Operator P.O. Box 2880, Dallas, TX	75221-2880	RECEIVED OCD ARTESIA	9. Pool name or Wildcat I.B. (MORROW) & (	UPPER PENN)
4. Well Location Unit Letter H : 223	5 Feet From The NORTH	Line and 91	Feet From The	EAST Line
		in a second		
Section 36	Township 21S Rai	r DF, RKB, RT, GR, etc	NMPM EDD	Y County
11. Check Ar	opropriate Box to Indicate I	3868 GL	Papart or Other 1	7/////////////////////////////////////
	NTENTION TO:	1	SEQUENT REP	
PERFORM REMEDIAL WORK	PLUG AND ABANDON L	REMEDIAL WORK		NG CASING L
TEMPORARILY ABANDON U	CHANGE PLANS	COMMENCE DRILLING		ND ABANDONMENT L
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB X	
OTHER:		OTHER:		
12. Describe Proposed or Completed Opwork) SEE RULE 1103.	erations (Clearly state all pertinent deta	ils, and give pertinent dat	tes, including estimated date	of starting any proposed
05-17-99 RIH W/ 36# J-59 CL 'C'. 05-18 & 19-99	TERSON DRILLING CO. RIG #55 5 ST&C CSG CSG SEAT @ 1304', TEMP. SURV. TOC 580' RIH W/ NESSED AND APPROVED BY VAN B	FC @ 1259'. CMT N 1" PIPE PUMPED A	W/ 200 SXS CL 'H' & TOTAL OF 600 SXS CL	'C' THRU 1", CIRC
7071', STAGE COLLAR @ 1	E; RIH W/ 220 JTS 7" 26# N- 7067'. CMT W/ 400 SXS 'H' CM W/ 800 PSI & CLOSED STAGE	T. DROP BOMB. SET	ECP & OPEN STAGE CO	OLLAR, PUMPED 200
I hereby certify that the information above is	True and complete to the best of my knowledge	and belief.  E PRORATION ANALYS	STDAT	е06-21-99

TYPE OR PRINT NAME STEPHEN FORE TELEPHONE NO. 97 2-7/5-4 (This space for State Use) DATE 6-29-99 APPROVED BY\_