

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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 type="checkbox"/>
5. Gas Lease No.	66-4897

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.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Kenneco Oil Company	8. State "W"
3. P. O. Box 1031 Midland, Texas	9. Well No.
4. Location of Well K 2314 south 330	10. Undesignated Wildcat
UNIT LETTER west FEET FROM THE 30 LINE AND 7-S FEET FROM 34-E	
THE LINE, SECTION TOWNSHIP RANGE NMPM.	
15. 4320 GL (Show whether DF, RT, GR, etc.)	Roosevelt

16. 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 checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

10-1-66 Spudded @ 10:00 a.m. Set 8-5/8" 24# J-55 casing @ 387'.
Cmtd w/140 sx Incor w/2% CaCl₂. WOC for 18 hrs.
Tested casing to 1000 psi for 30 min. w/no drop in pressure.
Cmt job considered satisfactory.

10-9-66 TD 4400'. Ran logs.

10-10-66 Set 4-1/2" 10.5# J-55 casing @ 4400'. Cmtd w/450 sx Incor w/16% gel & 3% salt plus 100 sx Incor Latex. Plug down @ 6:00 p.m.
Bumped plug w/2000# pressure.

10-12-66 WOC

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

SIGNED *A. W. Lang* TITLE Dist. Prod. Supt. DATE Oct. 13, 1966

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NUMBER 0001