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 NEW MEXICO OIL CONSERVATION COMMISSION
 AUG 11 11 38 AM '67

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

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. OG 1062

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Kerr-McGee Corporation	8. Farm or Lease Name State F
3. Address of Operator P. O. Box K, Surray, Texas	9. Well No. 9
4. Location of Well UNIT LETTER E , 1.650 FEET FROM THE North LINE AND 330 FEET FROM THE West LINE, SECTION 1 TOWNSHIP 8S RANGE 33E NMPM.	10. Field and Pool, or Wildcat Chaveroo
15. Elevation (Show whether DF, RT, GR, etc.) 4,339.7' GR	12. County Chaves

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <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.

Operator desires to fracture treat well through present perforations. Present perforations are one 0.47" bullet per foot at 4,306', 4,308', 4,310', 4,318', 4,321', 4,325', 4,328', 4,329', and 4,330'. Pump, rods, and tubing will be pulled. Fracture treatment will be down the 5½" OD casing. Fracture treatment will be 30,000 gallons of lease oil and 45,000 # of sand. After treatment, the well will be placed on pump again. Starting time of this work will be as soon as possible after your approval.

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

SIGNED *C. J. Breeden* TITLE Engineer DATE Aug. 3, 1967

APPROVED BY *[Signature]* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: