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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 checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. 7169
7. Unit Agreement Name
8. Farm or Lease Name State E 7169
9. Well No. 1
10. Field and Pool, or Wildcat King Devonian
12. County Lea

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"/>
2. Name of Operator Kerr-McGee Corporation
3. Address of Operator P.O. Box 250, Amarillo, Texas 79105
4. Location of Well UNIT LETTER L 330 FEET FROM THE West LINE AND 990 FEET FROM THE North LINE, SECTION 36 TOWNSHIP 13S RANGE 37E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3843.9 GR

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 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"/>

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.

8-18-74 The Kobe Pump was pumped out. Acidized w/ 1000 gal 15% regular Acid 12,280'-12,300', 12,376'-12,432', 12,530'-12,535' & 12,556'-12,590'. Took Acid on vacuum. Swabbed tubing. Reran Kobe Pump 8-30-74.

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

SIGNED E.L. Covert E.L. Covert, P.E. TITLE Production Engineer DATE 9-17-74
Joe D. Ramey
 Dist. I. Supv.
 APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: