N . OF COPIES RECEIVED	·					Form C-103		
DISTRIBUTION						Supersedes Old C-102 and C-103		
SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION						Effective 1-1-65		
FILE								
U.S.G.S.						5a. Indicate Type of Lease		
LAND OFFICE							ее. 🔃	
OPERATOR						5. State Oil & Gas Lease No.		
						8 -4109		
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.						7. Unit Agreement Name		
	VELL	OTHER- Injec	tion					
2. Name of Operator						8, Farm or Lease Name		
KERSEY & COMPANY						HOVER STATE		
3. Address of Operator						9. Well No.		
	ox 316, Ar	tesia, New Me	exico 8821	0		2		
4. Location of Well						10. Field and Pool, or Wildon	t	
UNIT LETTER B	<u>660</u>	FEET FROM TH	North	LINE AND	FEET FROM	MALJAMAR	****	
{тне} East	LINE, SECTION	32	NSHIP 17	RANGE	NMPM.			
mmm	mm	15. Elevation	(Show whether	DF, RT, GR, etc.)		12. County	HH	
			(, , , , , , , ,		Lea		
16.	Charle Am	Desprises Pou T	a Indianta N	ature of Nation Dana	on Oak			
МО	TICE OF INT		o Indicate N	ature of Notice, Repo		REPORT OF:		
PERFORM REMEDIAL WORK		PLUG AN	ID ABANDON	REMEDIAL WORK	片	ALTERING CASING	님	
TEMPORARILY ABANDON				COMMENCE DRILLING OPNS.		PLUG AND ABANDONM	1ENT	
PULL OR ALTER CASING		CHANGE	PLANS	CASING TEST AND CEMENT JO OTHER CASING L		WAY		
				OTHER COSTING L	eak Jui	vey		
OTHER								
17 Describe Proposed of	Completed Oper	utions (Clearly state	all pertinent dete	nils, and give pertinent dates	including	estimated date of starting any	proposed	
work) SEE RULE 11	оз.							
We	have comp	olied with the	e request	of the New Mexico	Oil Ca	nservation		
C.	mmicaios t	eo havo oach i	wall inclu	ding this one pre	nared f	or testing		
	11111111111111111111111111111111111111	O Have each v	Herr mora	aring titrs one pro	parca	or testing.		
tl	ne pressure	on the surfa	ace casing	, Production casi	ng, and	tubing.		
T∤	ne test was	conducted by	y NMOCC re	presentative on F	ebruary	22, 1979.		
Ti	ne results	were satisfac	ctory.					
			,					
				<u> </u>				
18. I hereby certify that	the information ab	ove is true and compl	lete to the best	of my knowledge and belief.				
14	01/1/20	n .						
SIGNED HAW	a ken	'ery	TITLE	Operator		DATE Feb. 27, 19	79	
				a ara mont	i Cath Ci			
Pro	· .	1	OII	. & GAS INSPE	ICIOH	MAR	111/2	
APPROVED BY	<u> </u>	Joan _	TITLE			DATE TO THE TOTAL		

CONDITIONS OF APPROVAL, IF ANY: