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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

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 Shell Oil Company	8. Farm or Lease Name McKinley A
3. Address of Operator P. O. Box 1509, Midland, Texas 79701	9. Well No. 7
4. Location of Well UNIT LETTER L 2310 FEET FROM THE South LINE AND 330 FEET FROM THE West LINE, SECTION 19 TOWNSHIP 19-S RANGE 38-E N.M.P.V.	10. Field and Pool, or Wildcat Hobbs
11. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

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.

February 6 through February 16, 1969

1. Pulled Production Equipment.
2. Perforated w/2-1/2" J S at 4193, 4194, 4195, 4196, 4225.50, 4227, 4228.50, 4230, 4232.
3. Ran tubg. w/pkr set at 4057'.
4. Acidized w/3500 gals 15% NEA w/100 RCNBS.
5. Pulled tbg.
6. Ran production equipment.
7. Placed on production.

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

Original Signed by: N. W. Harrison SIGNED N. W. Harrison TITLE Staff Operations Engineer DATE 4-10-69

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: