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NEW MEXICO OIL CONSERVATION COMMISSION  
HOBBS OFFICE, O. C. C.

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

MAY 23 1 17 PM '69

5a. Indicate Type of Lease	State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Term or Lease Time	H. D. McKinley
9. Well No.	3
10. Field and Pool, or Wildcat	Bowers
11. County	Lea

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT L" (FOR A C-103) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator Getty Oil Company
3. Address of Operator P. O. Box 249, Hobbs, New Mexico 88240	4. Location of Well UNIT LETTER H 2310 FEET FROM THE North LINE AND 330 FEET FROM East LINE, SECTION 30 TOWNSHIP 18S RANGE 30E N.M.P.M.
5. Elevation (Show whether L.F., R.F., GR., etc.) 3653 GR	6. County Lea

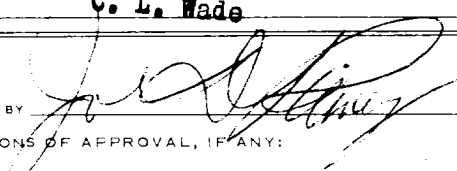
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPER. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	Fill Cellar <input checked="" 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.

5-19-69 Fill cellar with sand. Cellar inspected before filling by Mr. Leslie Clements with NMOCC.

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

SIGNED Original Signed By C. L. Wade	TITLE Area Superintendent	DATE May 22, 1969
APPROVED BY 	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		