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NEW MEXICO OIL CONSERVATION COMMISSION

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

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

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name	
2. Name of Operator Getty Oil Company		8. Form or Lease Name H. D. McKinley	
3. Address of Operator P. O. Box 249, Hobbs, New Mexico 88240		9. Well No. 9	
4. Location of Well UNIT LETTER G 2235 FEET FROM THE North LINE AND 2310 FEET FROM THE East LINE, SECTION 30 TOWNSHIP 18S RANGE 38E ANMPM.		10. Field and Pool, or Wildcat Undesignated	
11. Elevator (Show whether DE, RT, GR, etc.)		12. County Lea	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input 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 checked="" 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.

Spudded at 2:15 PM 7-19-69. Drilled 17-1/2" hole to 382". Set 13-3/8" 43# H-40 8RT casing at 378'. Cemented with 400 sacks Class "C" cement with 2% Cacl and 1/4# Cello-flake. Circulated an estimated 5 sacks cement. WOC 16 hours. Tested 13-3/8" casing with 800# for 30 minutes, no drop in pressure.

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

ORIGINAL SIGNED BY:

SIGNED <u>C. L. Wade</u>	TITLE <u>Area Supt.</u>	DATE <u>8-1-69</u>
APPROVED BY <u>[Signature]</u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		