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NEW MEXICO OIL CONSERVATION COMMISSION

3-MOCC  
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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 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
2. Name of Operator <b>GENTRY OIL COMPANY</b>		8. Farm or Lease Name <b>H. D. McKinley</b>	
3. Address of Operator <b>P.O. Box 249, Hobbs, New Mexico 88240</b>		9. Well No. <b>11</b>	
4. Location of Well UNIT LETTER <b>A</b> , <b>760</b> FEET FROM THE <b>North</b> LINE AND <b>550</b> FEET FROM THE <b>East</b> LINE, SECTION <b>30</b> TOWNSHIP <b>18 S</b> RANGE <b>38 E</b> N.M.P.M.		10. Field and Pool, or Wildcat <b>Undesignated</b>	
15. Elevation (Show whether DF, RT, GR, etc.) <b>3650 Gr.</b>		12. County <b>Lea</b>	

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.

Drilled 12-1/4" hole to 3850'. Set 9-5/8" 40# J-55 casing at 3848'. Cemented with 1000 sacks Class "C" 50-50 Pozmix with 4% gel and 5% salt and 5% Gileonite and 1/4# Floccle per sack and 200 sacks Class "C" with 3% salt per sack. Temperature survey indicated top of cement 75' from surface. WOC 24 hours, Tested 9-5/8" casing with 1400# 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

C. L. WADE

SIGNED \_\_\_\_\_

TITLE **Area Superintendent**

DATE **January 16, 1970**

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

WVA/Kh