NO. OF COPIES RECEIVED	, mari	Form C-100
DISTRIBUTION		Supersedes Gld
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103
	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		
U.S.G.S.		Sa. Indicate Type of Lease
LAND OFFICE		State 👗 Fee.
OPERATOR		5. State Oil & Gas Lease No.
**************************************		B-2317
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.)		
i. OIL X GAS WELL	OTHER.	7. Unit Agreement Name
Name of Operator		8. Farm or Lease Name
Kincaid & Watson Drilling Company		Hale State
3. Address of Operator	S conjunt	9. Well No.
P.O. Box 498, Artesia, New Mexico 882 10		1. Well No.
4. Location of Well		10. Field and Pool, or Wildcat
and scene E	2310 FEET FROM THE North LINE AND 330 FEET	Vacuum
West	TION 31 TOWNSHIP 17S RANGE 34E	
	HANGE	NAMPM.
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4100' Gr.	Lea
Charl	Appropries Day T. L. H. N. C.Y. D.	
	k Appropriate Box To Indicate Nature of Notice, Report of	or Other Data
NOTICE OF	INTENTION TO: SUBSEQ	UENT REPORT OF:
		_
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
BULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	OTHER	
o≅era e		
. As Time Proposed or Completed	Operations (Clearly state all pertinent details, and give pertinent dates, inc.	luding estimated date of starting any proposed
work) SEE RULE 1103.		
We downwad this	:	
we deepened thi	is well to 4693'.	
On April 13, 19 405 bbls. of lo	968, Dowell treated with 130 bbls. Dowell LST bad oil.	NE Acid and
After recovery of load oil, this well is making 52 BOPD		
18. I hereby certify that the information	on above is true and complete to the best of my knowledge and belief.	
	$\bigcap I^{\circ}$	
SIGNED /ancel	Time Assistant Secretary	April 22, 1968
	THE TOTAL DOOR COULTY	DATE APPIL 22, 1908
()	71/1/	
11.000	KH	
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF AN	NY:	
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