•				
NO. OF COPIES RECEIVED			Form C-103	
DISTRIBUTION			Supersedes Old C-102 and C-103	
SANTA FE	Effective 1-1-65			
FILE	NEW MEXICO OIL CONSE			
U.S.G.S.		01 200	5a. Indicate Type of Lease State Fee X	
LAND OFFICE	AUG 1 10 33	Aug I iu as AN '69		
OPERATOR		5. State Oil & Gas Lease No.		
	· · · · · · · · · · · · · · · · · · ·			
SUNE (DO NOT USE THIS FORM FOR F USE "APPLIC				
1. OIL X GAS WELL	OTHER.		7. Unit Agreement Name	
2. Name of Operator	8. Farm or Lease Name			
Marathon Oil Com	Bertha Barber			
3. Address of Operator	9. Well No.			
P. O. Box 220, 1	4			
4. Location of Well			10. Field and Pool, or Wildcat	
UNIT LETTER K	Monument San Andres			
THE West LINE, SEC				
	VIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			
	12. County Lea			
^{16.} Check	Appropriate Box To Indicate Na	ature of Notice. Report or Ot	her Data	
	INTENTION TO:	-	T REPORT OF:	
		r1		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	, PLUG AND ABANDONMENT	
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB OTHER Acid treatment			it (X	
		OTHER ALLU CIEALMEN		
OTHER	L., J			
	Operations (Clearly state all pertinent deta	ils, and give pertinent dates, including	g estimated date of starting any proposed	
work) SEE RULE 1103.				

Chemical Engineering treated 7" casing perforations from 3664-3706' with 250 gallons 15% NE acid with 100# Maximum Pressure. ISIP 0. Made 9 swab runs and well kicked off flowing. FTP 120-160#. Well flowed 228 bbls. total fluid and died.

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Preparing to install pumping equipment.

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

SIGNED_C.A. Hilton M.	TITLE	Area Superintendent	DATE_	July 24, 1969
APPROVED BY John us Rungan CONDITION OF APPROVAL, IF ANY:	TITLE	Ce. bojan	DATE_	AUG (1960)