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NEW MEXICO OIL CONSERVATION COMMISSION

APR 18 8 13 AM '66

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <b>Water Supply</b>	7. Unit Agreement Name <b>Warren McKee Unit Water Supply</b>
2. Name of Operator <b>Amerada Petroleum Corporation</b>	8. Farm or Lease Name
3. Address of Operator <b>P. O. Box 668 - Hobbs, New Mexico</b>	9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>F</b> <b>2310</b> FEET FROM THE <b>North</b> LINE AND <b>2331.1</b> FEET FROM THE <b>West</b> LINE, SECTION <b>7</b> TOWNSHIP <b>20S</b> RANGE <b>38E</b> NMPM.	10. Field and Pool, or Wildcat <b>Warren McKee</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3577' DF</b>	12. County <b>Lea</b>

16.

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 OPNS. <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"/>	
		OTHER <b>See Below</b> <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.

**Filed to show correct location as surveyed and staked by John W. West Engineering Co. 4-23-53.**

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

SIGNED *D.C. Campbell* TITLE District Superintendent DATE 4-15-66

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: