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NEW MEXICO OIL CONSERVATION COMMISSION

AUG 14 11 45 AM '69

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name Warren McKee Unit	
2. Name of Operator Amerada Hess Corporation		8. Farm or Lease Name	
3. Address of Operator P. O. Box 1920 - Hobbs, New Mexico		9. Well No. 601	
4. Location of Well UNIT LETTER P 330 FEET FROM THE South LINE AND 330 FEET FROM THE East LINE, SECTION 7 TOWNSHIP 20-S RANGE 38-E NMPM.		10. Field and Pool, or Wildcat Warren McKee - Simpson	
15. Elevation (Show whether DF, RT, GR, etc.) 3563' GL		12. County Lea	

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 JOBS <input type="checkbox"/>	OTHER Change Status <input checked="" 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.

Change status from oil well flowing by gas lift to oil well pumping by beam pump.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u><i>[Signature]</i></u>	TITLE District Superintendent	DATE August 13, 1969
APPROVED BY <u><i>[Signature]</i></u>	TITLE Geologist	DATE AUG 15 1969
CONDITIONS OF APPROVAL, IF ANY:		