

NEW MEXICO OIL CONSERVATION COMMISSION

SEP 17 1965

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No. <b>E-6622</b>	
7. Unit Agreement Name -	
8. Farm or Lease Name <b>State 36</b>	
9. Well No. <b>2</b>	
10. Field and Pool, or Wildcat <b>El Mar - Delaware</b>	
12. County <b>Lea</b>	

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"/>	
2. Name of Operator <b>Kern County Land Company</b>	
3. Address of Operator <b>418 First State Bank Bldg., Midland, Texas 79704</b>	
4. Location of Well UNIT LETTER <b>C</b> <b>543</b> FEET FROM THE <b>North</b> LINE AND <b>2108</b> FEET FROM THE <b>West</b> LINE, SECTION <b>36</b> TOWNSHIP <b>26S</b> RANGE <b>32E</b> NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) <b>3109 RT</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 checked="" 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 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.

8-24 Killed well with 80 bbls. lease crude. Round tripped tubing with packer.

8-25 Fraced well with 4000 gal. refined oil and 4500# 10-20 sand. MP 4000#, AP 3950#, Injection rate 5.4 BPM. ISDP 550#.

8-26 Tripped tubing. Ran pump and rods. Installed pumping unit.

8-27 Started well pumping.

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

SIGNED C. F. Eaton TITLE District Engineer DATE 9-17-65

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

CONDITIONS OF APPROVAL, IF ANY: