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NEW MEXICO OIL CONSERVATION COMMISSION

3 - NMCC
1 - File

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

OCT

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/> '67	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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- Water Injection		7. Unit Agreement Name
2. Name of Operator Getty Oil Company		8. Farm or Lease Name Justis McKee Unit
3. Address of Operator Box 249, Hobbs, N. Mex.		9. Well No. 612
4. Location of Well UNIT LETTER I 1650 FEET FROM THE South LINE AND 990 FEET FROM THE East LINE, SECTION 13 TOWNSHIP 25S RANGE 37E NMPM.		10. Field and Pool, or Wildcat Justis McKee
15. Elevation (Show whether DF, RT, GR, etc.) 3088 DF		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" 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 <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.

Tests indicate communication between Blinbry oil zone and McKee water injection zone. It is proposed to kill well, pull tubing and locate leak.

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

Original Signed By
C. L. WADE

SIGNED _____ TITLE **Area Supt.** DATE **10-2-67**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: