

NO. OF COPIES RECEIVED	3
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	1

# NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	<input checked="" type="checkbox"/> Federal	<input type="checkbox"/> Indian	Fee <input type="checkbox"/>
----------------------------	---	---------------------------------	------------------------------

5. State Oil & Gas Lease No.	Fed. Cont. #68
------------------------------	----------------

## 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <b>Water Injection</b>	7. Unit Agreement Name ---
2. Name of Operator <b>Skelly Oil Company</b>	8. Farm or Lease Name <b>Jicarilla "B"</b>
3. Address of Operator <b>330 So. Center, Rm. 208, Casper, WY 82601</b>	9. Well No. <b>6</b>
4. Location of Well UNIT LETTER <b>F</b> , <b>1980</b> FEET FROM THE <b>N</b> LINE AND <b>1980</b> FEET FROM THE <b>W</b> LINE, SECTION <b>32</b> TOWNSHIP <b>25N</b> RANGE <b>5W</b> NMPM.	10. Field and Pool, or Wildcat <b>Otero Gallup</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>6755DF</b>	12. County <b>Rio Arriba</b>

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 checked="" type="checkbox"/> <b>4/16/70</b>	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 <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.

This well is currently not needed for injection purposes. It is under study for recompletion to a possible productive zone.

Permission is requested for continuation of TA status for at least one year pending proper implementation of recompletion work.

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

SIGNED [Signature] TITLE Area Superintendent DATE 10/30/74

Original signed and sealed by [Signature]

SUPERVISOR [Signature]

NOV 7 1974

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

CONDITIONS OF APPROVAL, IF ANY: