NO. OF COPIES RECEIVED	3	7					Form C-103			
DISTRIBUTION	DISTRIBUTION						•	Supersedes Old		
SANTA FE	 	- NI	EW MEXICO OII	CONSE	RVATION C	OMMISSION	C-102 and C- Effective 1-1-			
FILE	1	* "	IN MEXICO ON	L CONSE	KYA HON C	OMMISSI OIT	Filective I-I-	03		
	//-	-					5a. Indicate Type	of Lex	ise	
U.S.G.S.		\dashv					Federate X In			
LAND OFFICE	1,	\dashv					5, State Oil & Go			
OPERATOR							Cont. # 14			
							111111111	7777	7777777	
(DO NOT USE THIS FO	SUND	RY NOTICES	AND REPOR	TS ON V	NELLS CK TO A DIFFER	ENT RESERVOIR.				
USE	"APP_ICA	ATION FOR PERMIT	-" (FORM C-101)	FOR SUCH	PROPOSALS.)		7. Unit Agreemer	7777	77111111	
OIL GAS			Todachdan	17-11			1	it Name		
WELL WEL	ــــــــــــــــــــــــــــــــــــــ	OTHER-	Injection	METT						
2. Name of Operator							l	8. Farm or Lease Name		
Skelly Oil Company								Navajo "P"		
3. Address of Operator	_						9. Well No.			
330 So. Cente	er-Rm.	208, Casp	er, Wy 826	01			6			
4. Location of Well							10. Field and Po	· ·	1	
UNIT LETTERP		660	T FROM THE	S	LINE AND	660 FEET FR	Many Rocks	₃=Gal	lup	
• • • • • • • • • • • • • • • • • • • •								1111.		
THEE	LINE SEC	_{-10N} 35	TOWNSHIP		32N BANGE	17W NMP	//////////////////////////////////////	////		
THE	LINE, SEC	TION			NANGE _	N INT	(
	11111	15.	Elevation (Show	whether I	F, RT, GR, e	tc.)	12. County	\overline{m}		
			54	O1 DF			San Juan			
16.		<u> </u>							********	
				icate Na	ature of No	tice, Report or C				
NOTI	CE OF	INTENTION	10:			SUBSEQUE	NT REPORT OF:			
Γ-	_					[]				
PERFORM REMEDIAL WORK		/1 /30	PLUG AND ABANI		REMEDIAL WOR	₹К	ALTER	RING CAS	SING	
TEMPORARILY ABANDON	<u>K</u> /	/1/73			COMMENCE DR	ILLING OPNS.	PLUG	AND ABA	NDONMENT	
PULL OR ALTER CASING			CHANGE PLANS			AND CEMENT JOB				
					OTHER					
OTHER				[_]						
17. Describe Proposed or C		0 11 (61-	.1		il	anti-ont data a impludi	no patimated data of			
work) SEE RULE 1103.		Operations (Orca	ity state are pere	inche dela	ino, and give p	create added, merado	ng commerce date of	01011111	, any proposed	
Injection to	be re	-initiated	in 1975.							
•										
Permission is	s requ	ested for	continuati	on of	TA statu	s for at leas	t one year.			
							,			
								-		
							•			
							<i>3</i>			
18. I hereby certify that the	informati	ion above is true	and complete to	the best o	f my knowledg	e and belief.				
14/	10 ,	1// 10								
K111	1/1	Uh. t.		A -	es Cuns	intendent	DATE10/	30/7/	.	
SIGNED	10/10	rulus	<u> </u>	TLEA	ea super	Titenaent	DATE	70//4	T	
77			1 1 2 2 2 2 3						ه شده	
J.≺ginal £	Signod	Dy the Section	l Armold				DATE NO	17	19/4	
APPROVED BY			тг	TLE			DATE THAT			

APPROVED BY ___