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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease Fed. <input checked="" type="checkbox"/> Indian <input type="checkbox"/>
5. State Oil & Gas Lease No. Fed. Cont. # 14-20-600-354

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injection Well	7. Unit Agreement Name -----
2. Name of Operator Skelly Oil Company	8. Farm or Lease Name Navajo "P"
3. Address of Operator 330 So. Center-Rm. 208, Casper, WY 82601	9. Well No. 7
4. Location of Well UNIT LETTER J 1980 FEET FROM THE E LINE AND 1980 FEET FROM THE S LINE, SECTION 35 TOWNSHIP 32N RANGE 17W NMPM.	10. Field and Pool, or Wildcat Many Rocks-Gallup
15. Elevation (Show whether DF, RT, GR, etc.) 5456 DF	12. County San Juan

16. 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 checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

Injection is to be re-started in 1975.

Permission is requested for continuation of TA status for at least one year.

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 by Emory C. Arnold
APPROVED BY _____ TITLE SUPERVISOR DIST. 26 DATE NOV 7 1974

CONDITIONS OF APPROVAL, IF ANY: