

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name
SKELLY PENROSE A UNIT

9. Well No.
68

10. Field and Pool, or WHdcat
LANGITE MATRIX SEVEN RIVERS QUEEN

12. County
LEA

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 GAS WELL OTHER

2. Name of Operator
TEXACO PRODUCING INC

3. Address of Operator
P.O. BOX 728 HOBBS, NM 88240

4. Location of Well
UNIT LETTER N 95 FEET FROM THE SOUTH LINE AND 2524 FEET FROM
THE WEST LINE, SECTION 3 TOWNSHIP 23 RANGE 37 NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3297 6L

16. 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 type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPHS. <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 checked="" 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.

DRILL 11" HOLE TO 2700' TD 2-1-88
2-1-88 RUN CG ITS 8 5/8 32" K-55 LTIC CSG SET @ 2700' FS @ 2700' FC @ 2617'
FCP @ 1234' BY TOOL @ 1236'
CEMENT IN 2 STAGES
1st STG. CMT w/ 350 SX CLASS II, 7.8" SALT, 1/4" FLOCCEL FB/ 200 SX CLASS II, 2% CaCl₂
CIRCULATE 6 HRS, SET FCP
2nd STG. CMT w/ 325 SX CLASS II, 2% CaCl₂, CTRL 20 SX TO HIT
CLOSE BY TOOL
2-2-88 TEST CASTING TO 1000 PSI FOR 30 MIN. HELD

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

SIGNED K.L. Johnson TITLE AREA SUPERINTENDENT DATE FEB 25 1988

APPROVED BY JERRY SEXTON TITLE DISTRICT I SUPERVISOR DATE FEB 29 1988

CONDITIONS OF APPROVAL, IF ANY: