

Submit 1 Copy To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

HOBBS OGD
RECEIVED
MAY 26 2020

CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-10672
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name SKELLY PENROSE B UNIT
8. Well Number 044
9. OGRID Number 012444
10. Pool name or Wildcat LANGLIE MATTIX (37240)

SUNDRY NOTICES/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. Type of Well: Oil Well ☐ Gas Well ☒ Other INJECTION

2. Name of Operator
PROVIDENCE ENERGY SERVICES, INC. dba KELTON OPERATING

3. Address of Operator
P.O. BOX 928, ANDREWS, TEXAS 79714-0928

4. Well Location

Unit Letter C : 660 feet from the NORTH line and 1980 feet from the WEST line
Section 8 Township 23S Range 37E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: ANNUAL UIC TEST ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

05/15/2020: RIG UP PARKER PUMP TRUCK. PRESSURE CASING TO 720#. TEST CASING FOR 32 MINUTES.
ENDING PRESSURE 720#.

Spud Date:

Rig Release Date:

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



SIGNATURE _____ TITLE PRESIDENT DATE MAY 20, 2020

Type or print name C. Dale Kelton E-mail address: providenceenergy@suddenlink.net PHONE: 432-661-1364
For State Use Only

APPROVED BY: Kerry Tate TITLE COA DATE 5-28-20
Conditions of Approval (if any):

HOBBS

MAY 26 2020

RECEIVED

Providence Energy Services, Inc dba Kelton Operating
OGRID #012444
ANNUAL UIC TESTS

Well Name: Skelly Penrose B Unit #044 - API #30-025-10672

Test Date 5-15-20 Test Minutes 32

Beginning PSI - 720 #; Ending PSI - 720 #

Test Company: Parker Energy Support Services

Meter Serial #: 2120 Calibration Date: 2-29-20

Truck # 35 Driver Name: Grey Mitchem

Driver Signature: [Signature]

