Township 23-8 Township 24-8 20 CONSERVATION DIVISION 20-21-10689 20 CONSERVATION DIVISION 20-21-10689 20 CONSERVATION DIVISION 20-21-10689 20	Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103	
SILE PINS SLA ANGER MISSION AND \$2 DELL CONNECTION OF DEAD CONTROL OF THE STATE STAT	District I = (575) 393-6161	Energy, Minerals and Natural Resources	August 1, 2011	
SILE PINS SLA ANGER MISSION AND \$2 DELL CONNECTION OF DEAD CONTROL OF THE STATE STAT	1625 N. French Dr., Hobbs, NM 88240		1 ' /	
1000 Rin Brazos Rd. Artes. NM 87-10 Santa Fe. NM 87505 Sante Fe. NM 87505 Solar Oil & Gas Lease No. 301940 Solar Report No. Small Processor No. 101940 Solar Report No. 101940 Solar Repo	811 S. First St., Artesia, NM 88210 LANG O	ALL CONSERVATION DIVISION		
Santa Pe, NM 37505 Santa Pe, NM 27505 Santa Pe, NM 27505 Solution (Santa Pe, NM 27505	District III - (505) 334-6178 JAN 2 9 2014 1220 South St. Francis Dr.			
1220 S. N. Francis Dr. Samarie F. NM RECEIVED 301940		Santa Fe, NM 87505		
GON NOT USE THIS FORM FOR PROPOSALS TO DRILL, OR TO DEBTHS OR PLUG BACK TO A DEBTHS ON THE STORM FOR SUCH PROPOSALS	1220 S. St. Francis Dr., Santa Fe, NM RECEN	/ED		
1. Type of Well: Oil Well	(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		Skelly Penrose B Unit	
2. Name of Operator Providence Energy Services, Inc. dba Kelton Operating 3. Address of Operator PO Box 928, Andrews, TX 79714-0928 4. Well Location Unit Letter N. 660			8. Well Number 61	
3. Address of Operator PO Box 928, Andrews, TX 79714-8928 4. Well Location Unit Letter N. 660 feet from the S. line and 1980 feet from the W. line Section 9 Township 23-S Range 37-E NMPM County Lea 11. Elevation (Show whether DR. RKB, RT, GR, etc.) 12. Check A line and 1980 feet from the S. line and 1980 feet from the W. line Section 9 Township 23-S Range 37-E NMPM County Lea 12. Check A line and section of the section of the section of the section of Plugging of well body only be for the section of the sec	2. Name of Operator		1	
4. Well Location Unit Letter N 660 feet from the S line and 1980 feet from the W line Section 9 Township 23-S Range 37-E NMPM County Lea 12. Check A 11. Elevation (Show whether DR. RKB, RT, GR, etc.) 12. Check A 11. Elevation (Show whether DR. RKB, RT, GR, etc.) 13. Check A 12. Check A 13. Check A 14. Elevation (Show whether DR. RKB, RT, GR, etc.) 14. Elevation (Show whether DR. RKB, RT, GR, etc.) 15. Check A 15. Check A 16. Chec				
Unit Letter N 660 feet from the S line and 1980 feet from the W line Section 9 Township 23-8 Range 37-E NMPM County Lea 11. Elevation (Show whether DR. RRB, RT, GR, etc.) 12. Check A 11. Elevation (Show whether DR. RRB, RT, GR, etc.) 12. Check A 2 line and pending seepen of licate Nature of Notice, Report or Other Data 13. SUBSEQUENT REPORT OF: 14. Chock Superficially for Subsequent Report of Nell PADO (Superficially for Subsequent PADO (Subsequent PAD			Langlie Mattix (37240)	
12. Check A	l ,			
12. Check A Check				
Casing/cement of state of stating any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagregation of stating any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagregation of subject of stating any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. 12/20/13 MIRU plugging equipment. Dug out cellar. ND wellhead. NU BOP. RIH w/ tbg to 3429. 12/23/13 Circulated well w/ mul laden fluid. Spotted 25 sx cement @ 3429-3229. POH to 2450'. Spotted 135 sx cement @ 2450-1170. POH w/ tbg. WOC. Tagged cement @ 1178'. POH. Per'd csg @ 1170. Set packer @ 60' and pressured up on csg. to 700 psi. RIH w/ tbg to 178-978. (per Mark Whitaker). Per'd csg @ 200'. Set packer @ 60' and pressured up on csg. to 700 psi. RIH w/ tbg to 121' and spotted 30 sx cement @ 251-surface. Rigged down and moved off. 12/20/13 Moved in backhoe and welder. Dug out cellar. Cut off wellhead. Welded on "Above Ground Dry Hole Marker". Dug up and removed deadmen. Cleaned location and moved off. Spud Date: RemeDIAL WORK				
CASING/CEMENT JOB CASING/CEMENT JOB CASING/CEMENT JOB OTHER: OTHER	11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
Type or print name C. Dale LECTON E-mail address: PROVIDENCE PROVED BY: APPROVED BY: The the information above is true and complete to the best of my knowledge and belief. DATE 1-23-2014 E-mail address: PROVIDENCE PROPERTY PHONE: 432.666.1864 DATE 02/03/2014	CASING/CEMENT JOB CASING CASIN			
Type or print name C. Dale KELTON E-mail address: PROVIDENCE encegy PHONE: 432.661.1364 For State Use Only APPROVED BY: Malluritum TITLE Composione Officer DATE 02/03/2014	Spud Date:	Rig Release Date:		
Type or print name C-Dale LECTON E-mail address: PROVIDENCE PROVED BY: Mallitum TITLE Compliance Officer DATE 02/03/2014	I hereby certify that the information above	e is true and complete to the best of my knowled	ge and belief.	
APPROVED BY: Mallunitala TITLE Compliance Officer DATE 02/03/2014	SIGNATURE	/	1 11151	
APPROVED BY: Mallititula TITLE Compstience Officer DATE 02/03/2014 Conditions of Approval (if any):	For State Use Only Supplementation E-mail address: DROVIDENCE 99 PHONE: 452.601.1364			
	APPROVED BY:Conditions of Approval (if any):	tala_ TITLE Congoliana Of	hur DATE 02/03/2014	