Form 3160-5 (June 1990)

NM OIL CONS COMMISSION

Form 3160-5 (June 1990)	DEPARTME	IITED STATES ENT OF THE INT LAND MANAG			Budg	PDD NM 88210 FORM APPROVED et Bureau No. 1004-0135 pires: March 31, 1993
Do not	SUNDRY NOTICE use this form for proposals to Use "APPLICATION	drill or to deepen o	r reentry to a di	fferent reservoir.	5. Lease Designat 6. If Indian, Alottee	LC-029419 A
	SUBM	MIT IN TRIPLICATI	E		7. If Unit or CA, A	reement Designation
1. Type of Well:	OIL GAS WELL	OTHER INJE	OTHER INJECTION 8. Well Name and Number SKELLY UNIT			
2. Name of Operator	TEXACO EXPLOR	ATION & PRODUC	CTION INC. 56			
3. Address and Telephone No. P.O. BOX 730, HOBBS, NM 88240 397-0426					9. API Weli No. 30 015 05350	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Letter N: 660 Feet From The SOUTH Line and 1980 Feet From The					10. Field and Pool, Exploratory Area GRAYBURG JACKSON 7RVS QN GB SA	
WEST Line	Section 22	Township 17S	Ran	ge <u>31E</u>	11. County or Par	sh, State EDDY , NEW MEXICO
12.	Check Appropriate	Box(s) To Ind	dicate Nati	ure of Notice, R	eport, or Oth	er Data
TYPE OF SU	BMISSION			T	YPE OF ACTION	
☐ Notice of In Subsequer Final Aban			Abandonment Recompletion Plugging Back Casing Repait Altering Casing	k r		Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection
			OTHER:	RETURNED TO INJEC	(Not	Dispose Water E. Report results of multiple completion on Well pletion or Recompletion Report and Log Form.)
directionally drilled THIS FORM IS Returned to injectio Mechanical Integrity	, give subsurface locations and S IN RESPONSE TO BLM N	measured and true ver OTICE NM-067-95- by Rowland Trucking co Oil Coservation E	tical depths for a JA-118.***** to 300 PSI jun. 10.100/j.jun.2019	all markers and zones pe	estimated date of s	tarting any proposed work. If well is
		N 79				
						Section (1)

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14. I hereby certify that the foregoing is true and correct SIGNATURE	TITLE Engineering Assista	ant DATE	1/5/95
TYPE OR PRINT NAME	Darrell J. Carriger		
(This space for Federal or State office use)			
APPROVED BY	TITLE	DATE	
CONDITIONS OF APPROVAL, IF ANY:	 		

