

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

M OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210
FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

C15F

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well: ☐ OIL WELL ☐ GAS WELL ☒ OTHER INJECTION

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address and Telephone No. P.O. BOX 730, HOBBS, NM 88240 397-0426

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter P : 810 Feet From The SOUTH Line and 660 Feet From The
EAST Line Section 23 Township 17S Range 31E

5. Lease Designation and Serial No.
LC-029418 B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number
SKELLY UNIT
81

9. API Well No.
30 015 05371

10. Field and Pool, Exploratory Area
GRAYBURG JACKSON 7RVS QN GB SA

11. County or Parish, State
EDDY, NEW MEXICO

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> OTHER: RETURNED TO INJECTION	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

*****THIS FORM IS IN RESPONSE TO BLM NOTICE NM-067-95-JA-118.*****

Returned to injection 2/94
Mechanical Integrity Test: (6/21/94); performed by Rowland Trucking to 300 PSI <held>.
Verbally approved by Ray Smith of the New Mexico Oil Conservation Division (6/20/94).

RECEIVED

FEB - 6 1995

OIL CON. DIV.
BIAH

ACCEPTED FOR REPORT

FEB 2

SJS

I hereby certify that the foregoing is true and correct

SIGNATURE [Signature] TITLE Engineering Assistant 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:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

