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OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
Fed <input type="checkbox"/> State <input checked="" type="checkbox"/> Indian <input type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No.	
Fed. Cont. #34	

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 <input checked="" type="checkbox"/> WELL GAS <input type="checkbox"/> WELL OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
Skelly Oil Company		Jicarilla "C"
3. Address of Operator		9. Well No.
330 So. Center-Rm 208, Casper, Wy 82601		22
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER <u>E</u> 1980 FEET FROM THE <u>N</u> LINE AND 660 FEET FROM		Otero Gallup
THE <u>E</u> LINE, SECTION <u>33</u> TOWNSHIP <u>25N</u> RANGE <u>5W</u> NMPM.		
15. Elevation (Show whether DF, RT, GR, etc.)		12. County
6793 DF		Rio Arriba

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/> 5/31/74	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input 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.

This well is no longer economically productive from Gallup Formation and is under study for downhole remedial work and possible recompletion to other productive zones.

Permission is requested for continuation of TA status for at least one year pending proper implementation of remedial and recompletion work.

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

SIGNED [Signature] TITLE Area Superintendent DATE 10/30/74

APPROVED BY Original Signed by Emory G. Arnold TITLE DATE NOV 7 1974

CONDITIONS OF APPROVAL, IF ANY: