Submit 1 Copy To Appropriate District Dffice →	State of New Mexico	Form C-103
District I Energy, Minerals and Natural Resources		WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM88210 IVOIL CONSERVATION DIVISION		30-025-10648 5. Indicate Type of Lease
District III 1220 South St. Francis Dr.		STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 87505		6. State Oil & Gas Lease No. 307841
87505 HORDSOO SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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.)		SKELLY PENROSE B UNIT 8. Well Number 022
Type of Well: Oil Well		9. OGRID Number 012444
PROVIDENCE ENERGY SERVICES, INC. dba KELTON OPERATING		10. Pool name or Wildcat
3. Address of Operator P.O. BOX 928, ANDREWS, TEXAS 79714-0928		LANGLIE MATTIX (37240)
4. Well Location		
Unit Letter A: 330 feet from the NORTH line and 330 feet from the EAST line Section 6 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: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE		
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.		
proposed completion of recompletion.		
Run Mechanical Integrity Test to extend T.A status of well.		
Run Mechanical Integrity Test to extend 1.A status of well. OMo. OMg		
Condition of Approval: Notify OCD Hobbs		
	office 24	hours prior of running MIT Test & Chart
		
Spud Date:	Rig Release Date:	
Lip		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE DATE January 3, 2011		
Type or print name <u>C. Dale Kelton</u> E-mail address: <u>providenceenergy@suddenlink.net</u> PHONE: <u>432-661-1364</u>		
For State Use Only		
APPROVED BY: Ether TITLE SAH MA DATE /- 26-2011		
Conditions of Approval (if any):		

Kelton Operating Corporation - WELL DIAGRAM

