

N. M. O. C. 2  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT OR CATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-029418(b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <b>Water Injection</b>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR <b>Skelly Oil Company</b>		8. FARM OR LEASE NAME <b>Lea 'C'</b>	
3. ADDRESS OF OPERATOR <b>P. O. Box 1351, Midland, Texas 79701</b>		9. WELL NO. <b>2</b>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <b>Unit Letter B, 660' FNL &amp; 1930' FEL, Sec. 11-17S-31E</b>		10. FIELD AND POOL, OR WILDCAT <b>Grayburg-Jackson</b>	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 11-17S-31E</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>3968' DF</b>		12. COUNTY OR PARISH <b>Eddy</b>	
		13. STATE <b>New Mexico</b>	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <b>Convert to Water Injection</b> <input checked="" type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. 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.)\*

Skelly Oil Company respectfully requests that administrative approval be granted to do the following work as designated by New Mexico Oil Conservation Commission Order No. R-4697 dated January 15, 1974. This conversion is necessary to continue the orderly development of the injection pattern.

- 1) Move in workover rig. Pull rods and tubing.
- 2) Load wellbore with 500 gals. 15% NE acid.
- 3) Set coated injection tubing with packer set at  $\pm$  3425' and load tubing casing annulus with treated water.
- 4) Place well on injection status, injecting water thru Grayburg-San Andres perms. 3463-3974'.

RECEIVED  
SEP 22 1975  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO18. I hereby certify that the foregoing is true and correct  
(signed) **D. R. Crow**SIGNED **D. R. Crow**TITLE **Lead Clerk**DATE **9-19-75**

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side