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NEW MEXICO OIL CONSERVATION COMMISSION

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

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

SUNDARY 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 WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Skelly Oil Company	8. Farm or Lease Name Jicarilla "C"
3. Address of Operator 330 So. Center, Rm 208, Casper, WY 82601	9. Well No. 2
4. Location of Well UNIT LETTER _____ 1295 FEET FROM THE N LINE AND 1295 FEET FROM THE W LINE, SECTION 28 TOWNSHIP 25N RANGE 5W NMPM.	10. Field and Pool, or Wildcat S. Blanco-P.C.
15. Elevation (Show whether DF, RT, GR, etc.) 6608 DF	12. County Rio Arriba

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <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.

Well is to be properly plugged in compliance with NMOCC Rule 202.

Time and date of plugging depends on availability of plugging contractor, therefore permission is requested for continuation of TA status for one year.

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 [Signature] TITLE [Signature] DATE NOV 7 1974