Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I	OIL CONSERVATIO	ON DIVISION	
P.O. Box 1980, Hobbs NM 88241-1980 2040 Pacheco St.		WELL API NO.	
Santa Fe, NM 87505		30-025-33985	
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE X FEE FEE
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS			
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			SKELLY PENROSE A
1. Type of Well: OIL GAS WELL OTHER			
2. Name of Operator GRUY PETROLEUM MANAGEMENT COMPANY			8. Well No. UNIT 95
3. Address of Operator			9. Pool name or Wildcat LANGLIE MATTIX 7 RIVERS-QN
4. Well Location Unit LetterF 1560 _ Feet From TheNORTHLine and1358			
Section 10 Township 23S Range 37E NMPM LEA County			
<i>(111111111111111111111111111111111111</i>	//////////////////////////////////////		
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INT	ENTION TO:	SUB:	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING			OPNS. PLUG AND ABANDONMENT X
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB
OTHER:		OTHER:	
12. Describe Proposed or Completed Operation Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.			
8-24-04 TAG PLUG @ 2687' 8-25-04 SPOT 45 SKS @ 2448 W.O.C & TAG @ 2170' OK'D BY GARY WINK OCD PERF @ 1260' COULD NOT PUMP IN SPOT 25 SKS WOC & TAG @ 1027' 8-26-04 PERF @ 475 COULD NOT PUMP IN CIRCULATE 55 SKS TO SURFACE			
Approved as to plugging of the Well Bore. Liability under bond is retained until surface restoration is completed.			
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Liability under bond is retained until			
surface restoration is completed.			
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE	bush. Elm	E CEMENTER / AGEN	T DATE 8-26-04
TYPE OR PRINT NAME JEFF KESTER /	DAVID A. EYLER (432)687-3033	TELEPHONE NO. 432-547-2926
(This space for State Use)	1-1		ISTAFF MANAGERS
APPROVED BY LAW ULL CONDITIONS OF APPROVAL F ANY:	INK IIII	E CENTATIVE II	DATE
(This space for State Use) APPROVED BY HOND OF APPROVALLE ANY: OCT 1 2 2004 REPRESENTATIVE III STAFF NAME DATE			
QC Line			