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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	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection		7. Unit Agreement Name West Dollarhide Drinkard Unit
2. Name of Operator Skelly Oil Company		8. Farm or Lease Name West Dollarhide Drinkard Unit
3. Address of Operator P. O. Box 1351, Midland, Texas, 79701		9. Well No. 10
4. Location of Well UNIT LETTER N 660 FEET FROM THE South LINE AND 2303 FEET FROM THE West LINE, SECTION 19 TOWNSHIP 24S RANGE 38E NMPM.		10. Field and Pool, or Wildcat Dollarhide Tubb-Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3165' RT		12. County Lea

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER Perf. & acidize additional pay <input checked="" 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.

We propose opening additional pay in the Main Drinkard and Upper Abo Zones as follows to permit proper flooding of the entire Main Drinkard:

- 1) Check for fill inside the 5-1/2" OD casing with wireline.
- 2) Perforate 5-1/2" OD casing 6622-6630', 6633-6636', 6640-6648', 6652-6656', 6720-6723', 6789-6791', and 6792-6798', with 2 holes per foot.
- 3) Acidize perms. 6622-6798' with 5300 gals. 15% DS-30 acid in 4 stages using rock salt as a diverting agent.
- 4) Resume injection.
- 5) After approximately 2 weeks of stabilized injection, run injection profile.

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

SIGNED (Signed) D. R. Crow **D. R. Crow** TITLE Lead Clerk DATE Dec. 1, 1972

APPROVED BY Orig. Signed by Joe D. Ramey TITLE Dist. I, Supv. DATE DEC 8 1972

CONDITIONS OF APPROVAL, IF ANY: