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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-10;
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. OG-584
7. Unit Agreement Name
8. Farm or Lease Name Skelly-State
9. Well No. 2
10. Field and Pool, or Wildcat M. Lane Permo-Penn
12. County Lea

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator Charles E. Read 3. Address of Operator P.O. Box 2126, Roswell, New Mexico 88201 4. Location of Well UNIT LETTER <u>F</u> <u>2086</u> FEET FROM THE <u>North</u> LINE AND <u>2086</u> FEET FROM THE <u>West</u> LINE, SECTION <u>10</u> TOWNSHIP <u>10S</u> RANGE <u>33E</u> NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 4229.8'

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 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 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.

It is our intention not to complete the plugging of this well until we determine whether or not to use it as a salt water disposal well. Our decision to complete this as a salt water disposal well will be made shortly after the first of the year.

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

SIGNED [Signature] TITLE Agent DATE October 16, 1968
APPROVED BY [Signature] TITLE DATE
CONDITIONS OF APPROVAL, IF ANY: