| . C COPIES RECEIVED  | <del> </del>                           |  |                        | Supersedes Ol                  | d                                     |  |  |
|--|--|--|------------------------|--------------------------------|---------------------------------------|--|--|
| TRIBUTION  |  |  |                        |                                | C-102 and C-103                       |  |  |
| FE   | NEW MEXICO OIL CONSERVATION COMMISSION |  |                        | Effective 1-1-65               |                                       |  |  |
| rE   |  |  |                        |                                |                                       |  |  |
| U.S.G.S.   |  |  |                        | 5a. Indicate Type              |                                       |  |  |
| LAND OFFICE  |  |  |                        | State X                        | Fee.                                  |  |  |
| OPERATOR   |  |  |                        | 5. State Oil & Gas<br>K-1369   | Lease No.                             |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS  |  |  |                        | HIIIII                         |                                       |  |  |
| (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.   |  |  |                        | 7. Unit Agreement              | Name                                  |  |  |
| WELL GAS WELL  | OTHER- WAL                             | r Injection                                  |                        |                                |                                       |  |  |
| 2. Name of Operator  |  |  |                        | 8. Farm or Lease Name          |                                       |  |  |
| Skelly OII Company   |  |  |                        | Hobbs "T"                      |                                       |  |  |
| 3. Address of Operator   |  |  |                        | 9. Well No.                    |                                       |  |  |
| P. O. Box 1351, Midland, Texas 79701   |  |  |                        | 11                             |                                       |  |  |
| 4. Location of Well  |  |  |                        | 10. Field and Pool, or Wildcat |                                       |  |  |
| UNIT LETTER  | 660 FEET FROM                          | THE South LINE AND 66                        | FEET FROM              | Chaveroo S                     | an Andres                             |  |  |
|  |  |  |                        |                                |                                       |  |  |
| THE <b>East</b> Line, SI   | ECTION T                               | OWNSHIP RANGE                                | 33E NMPM.              |                                |                                       |  |  |
|  |  |  |                        |                                |                                       |  |  |
|  | 15. Elevat                             | ion (Show whether DF, RT, GR, etc.)  4426 DF |                        | 12. County Roosevelt           |                                       |  |  |
|  |  | 4420 DE                                      |                        | KOOBEAETC                      | <u> </u>                              |  |  |
| Chee   | ck Appropriate Box                     | To Indicate Nature of Notice                 | e, Report or Ot        | her Data                       |                                       |  |  |
| NOTICE O   | F INTENTION TO:                        | 1  | SUBSEQUEN <sup>-</sup> | T REPORT OF:                   |                                       |  |  |
|  |  |  | <del></del> -          |                                |                                       |  |  |
| PERFORM REMEDIAL WORK  | PLUG                                   | AND ABANDON REMEDIAL WORK                    |                        | ALTER                          | NG CASING                             |  |  |
| TEMPORARILY ABANDON  |  | COMMENCE DRILLI                              | NG OPNS.               | PLUG A                         | ND ABANDONMENT                        |  |  |
| PULL OR ALTER CASING   | CHAN                                   | GE PLANS CASING TEST AND                     |                        |                                | [min                                  |  |  |
|  |  | other Con                                    | vert to injec          | tion                           | X                                     |  |  |
| OTHER  |  |  |                        |                                |                                       |  |  |
| 17 Describe Proposed or Complete   | ed Operations (Clearly sta             | te all pertinent details, and give perti     | nent dates, including  | estimated date of s            | tarting any proposed                  |  |  |
| work) SEE RULE 1103.   |  |  | , ,                    | ,                              |                                       |  |  |
|  | 4. 9 44 97                             | W. 11-1 Author and Wales                     | P                      | .t. 9                          |                                       |  |  |
| 1) Moved in pulling  | unit 1-11-/4.                          | Pulled tubing and Bake                       | IL SOUT WESON          | IDTA.                          |                                       |  |  |
|  | 'amiri\                                | i 00 dahama11m alaahda                       |                        |                                |                                       |  |  |
| 2) Ran 119 joints (  | 3/45') or 2-3/8                        | " OD internally plastic                      | ; coated tubi          | ng.                            |                                       |  |  |
| a) almostand adab  |  | ith corrosion inhibitor                      | •                      |                                |                                       |  |  |
| 3) Circulated with   | Mater freetad M                        | ten corrosion immibitor                      | • •                    |                                |                                       |  |  |
| 4) Cat marken at 27  | es t                                   |  |                        |                                |                                       |  |  |
| 4) Set packer at 37  | 31.                                    |  |                        |                                |                                       |  |  |
| #\ Commonad dedact   | dan 1-16-76 at                         | the rate of 350 barrels                      | of weter no            | r dew et vo                    | ro                                    |  |  |
| 5) Commenced inject  | TOU T-TO-14 EF                         | per and Lower San Andre                      | , or water be          | me 4207-441                    | R <sup>†</sup> and                    |  |  |
|  | crug curougn op                        | ber sun moner sen waare                      | m herrorecre           | )110 420/441                   | J and                                 |  |  |
| 4676-4849°.  |  |  |                        |                                |                                       |  |  |
|  |  |  |                        |                                |                                       |  |  |
|  |  |  |                        |                                |                                       |  |  |
|  |  |  |                        |                                |                                       |  |  |
|  |  |  |                        |                                |                                       |  |  |
|  |  |  |                        |                                |                                       |  |  |
|  |  |  |                        |                                |                                       |  |  |
|  |  |  |                        |                                |                                       |  |  |
| 18. I hereby certify that the inform   | ation above is true and co             | mplete to the best of my knowledge ar        | nd belief.             |                                |                                       |  |  |
|  |  |  |                        |                                |                                       |  |  |
| SIGNED   | D. R. Crow                             | TITLE Lead Clerk                             |                        | DATE 1-24                      | -74                                   |  |  |
|  |  |  |                        |                                |                                       |  |  |
|  |  |  |                        |                                | e e ware                              |  |  |
|  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |  |                        |                                | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |  |  |

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: