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LAND OFFICE	
OPERATOR	

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 checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. K-1370
7. Unit Agreement Name -
8. Farm or Lease Name Hobbs "W"
9. Well No. 2
10. Field and Pool, or Wildcat Chaveroe San Andres
12. County ROOSEVELT

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 <input type="checkbox"/>
2. Name of Operator SKILLY OIL COMPANY
3. Address of Operator Box 730; Hobbs, New Mexico 88240
4. Location of Well UNIT LETTER A 990 FEET FROM THE East LINE AND 330 FEET FROM THE North LINE, SECTION 30 TOWNSHIP 78 RANGE 34E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 4322' DF

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"/>	OTHER <input checked="" type="checkbox"/> Perforate, acidize and frac	CASING TEST AND CEMENT JOH <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.

Pull rods and tubing. Perforate 4-1/2" OD casing 4159-4192'.

Run tubing, packer and retrievable bridge plug. Treat perforations with acid and ball sealers.

Pull tubing, packer and bridge plug. Treat casing perforations with brine and sand.

Run tubing, pump and rods and return well to production.

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

SIGNED (Signed) V. E. Fletcher. TITLE District Superintendent DATE April 11, 1968

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

MLF:er