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SANTA FE	NO. OF COPIES RECEIVED			Form C-103
SARTA FE       Image: Samta FE       Image:	DISTRIBUTION			
FILE       U.S.G.S.         LAND OFFICE       DPERATOR         OPERATOR       State Oil 6 Gas Lebae No.         ICO NOT USE THIS FORM FOR PROPERSING TO CONSULT AN FORMULA ON DEPERSING RESERVOR.       State Oil 6 Gas Lebae No.         ICO NOT USE THIS FORM FOR PROPERSING TO CONSULT AN FORMULA ON DEPERSING RESERVOR.       To the second the propersion of	SANTA FE	NEW MEXICO OIL (	CONSERVATION COMMISSION	
LAND OFFICE       State       Fee         OPERATOR       State       Fee         State       State       State         OPERATOR       State       State         State       State       <	FILE			
OPERATOR       S. Stite OII 6 Gas Lease No.         SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON TO DEFENS ON WELLS (DO NOT USE THIS FORUNT CATION FOR POWNET ON THE CATION FOR POWNET ON TO DEFENS (DO NOT USE THIS FORUMT CATION FOR POWNET ON THE CATION FOR POWNET (DO NOT USE THIS FORUMT CATION FOR POWNET ON THE CATION FOR POWNET ON TO DEFENS (DO NOT USE THIS FORUMT CATION FOR POWNET ON THE CASING FOR ALL ADDAN THE CATION FOR POWNET ON THE CATION FOR POWNET ON THE CATION FOR POWNET ON THE CASING FOR ALL ADDAN PULL OF ALTER CASING CATEON FOR POWNET CATEON FOR POWNET ON FOR POWNET ON FOR POWNET ON FOR POWNET ON THE CASING FOW	U.S.G.S.			5a. Indicate Type of Lease
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1.       OIL       GAS       OTHER       OTHER       7. Unit Agreement Noice         2. Name of Guerator       Skelly 011 Company       7. Unit Agreement Noice         3. Additees of Operator       Skelly 011 Company       8. A. Foster         3. Additees of Operator       5. Well Unit       9. O. Box 1351, Midland, Texas 79701       2         4. Location of Well       Io. Fleet PROM THE       South       Io. Fleet and Pool, or Wildow         UNIT LETTER       I       1980       FLEET FROM THE       South       Io. Fleet and Pool, or Wildow         UNIT LETTER       I       1980       FLEET FROM THE       South       Io. Fleet and Pool, or Wildow         UNIT LETTER       I       1980       FLEET FROM THE       South       Io. Fleet and Pool, or Wildow         UNIT LETTER       I       1980       FLEET FROM THE       South       Io. Fleet and Pool, or Wildow         UNIT LETTER       I       1980       FLEET FROM THE       South       Io. Fleet and Pool, or Wildow         INTER       Io. Elevation (Show whether DF, RT, CR. etc.)       III. Country       III. Country       III. Country         If.       Check Appropriate Box To Indicate Nature of Notice, Report of Other Data       Auttants Casing       Auttants Casing         PULG AN LIFER Casing <td< td=""><td>OPERATOR</td><td>-</td><td></td><td>5. State Oil &amp; Gas Lease No.</td></td<>	OPERATOR	-		5. State Oil & Gas Lease No.
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OIL S       GAS WELL OTHER.         2. Name of Operator       A. C. C. C. S. P. Large Diage D		ATION FOR PERMIT -** (FORM C-101) FO	DR SUCH PROPOSALS.)	
M. A. Foster         3. Address of Operator       S. Well Ho.         P. O. Box 1351, Midland, Texas 79701       2         4. Location of Well       10. Field and Pool, or Wildedt         UNIT LETTER       I         1980       FEET FROM THE         South       Line AND         660       FEET FROM         THE       East         LINE, SECTION       27         TOWNSHIP       128         PARGE       37E         NMPM.       12. County         15. Elevation (Show whether DF, RT, GR etc.)       12. County         16.       Check Appropriate Box To Indicate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON       Remed.A. work         OTHER       CHANGE PLANS       CHANGE PLANS         OTHER       OTHER       OTHER         17. Describe Proposed or Completed Operations (Clearly state all pertinent datas), and give pertinent dates, including estimated date of st using usy proprior		OTHER-		7. Omit Agreement Name
3. Address of Operator       9. Well Ho.         P. O. Box 1351, Midland, Texas 79701       9. Well Ho.         4. Location of Well       10. Field and Pool, of Wildest         UNIT LETTER       1         1       1980         FEET FROM THE       South         LINE AND       660         FHE       East         LINE, SECTION       27         TOWNSHIP       128         PANGE       37E         MARK       898' DF         16.       Check Appropriate Box To Indicate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON         PULL OF ALTER CASING       CHANGE PLANS         OTHER       OTHER         17, Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of st tring on proposed	2. Name of Operator	8. ° ∠n. p. Louse Name		
3. Address of Operator       S. Well HU.         P. O. Box 1351, Midland, Texas 79701       S. Well HU.         4. Location of Well       10. Field and Pool, or Wildoot         UNIT LETTER       I       1980         FEET FROM THE       South       660         THE       East       LINE, SECTION         15. Elevation (Show wherker DF, RT, GR. etc.)       12. Pounty         16.       Check Appropriate Box To Indicate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON         PULL OF ALTER CASING       CHANGE PLANS         OTHER       OTHER         17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of straing cry proprietor	Skelly Oil Company			M. A. Foster
4. Location of Well       10. Field and Pool, or Wildoct         UNIT LETTER       I       1980       FEET FROM THE       South       South       Ine and       660       FEET FROM       Gladiola Wolfcamp         THE       East       LINE, SECTION       27       TOWNSHIP       128       PANGE       37E       NMPM.         16.       Check Appropriate Box To Indicate Nature of Notice, Report or Other Data       12. County       Lea         16.       Check Appropriate Box To Indicate Nature of Notice, Report or Other Data       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON       REMEDIAL WORK       ALTERING CALING         PULL OR ALTER CASING       CHANGE PLANS       CASING TEST AND CEMENT JOB       PLUG AND ABANDON         17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of straing are proposed	3. Address of Operator			
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17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of storing any proposed			OTHER	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of staring any proposed work) SEE RULE 1103.				
work) SEE RULE 1103.			- L	
	17. Describe Proposed or Completed	Operations (Clearly state all pertines	nt details, and give pertinent dates, incl	uding estimated date of storing any provised

- 1) Pull tubing and Reda pump.
- 2) Run tubing open-ended and load hole with 10# mud. Spot 45 sacks of cement at 9525-9875'. Pull tubing.
- 3) Shoot 5-1/2"OD casing at approximately 6700' and pull.
- 4) Shoot 8-5/8"OD casing at approximately 600' and pull.

5) Run tubing and spot cement plugs as follows:
25 sacks across stub of 5-1/2"OD casing
25 sacks at 7180-7240"
25 sacks at 6530-6590"
25 sacks at 5900-5960"
25 sacks at 4425-4500"
25 sacks at 4425-4500"
25 sacks across stub of 8-5/8"OD casing
25 sacks 360-380"
6). Set warket.

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

S (GNED	(Sighed) 4. R. Avent	TITLE _	District Adm. Coordinator	DATE_	May 1,	1970
APPROVED BY CONDITIONS 2	F APPROVAL, IF ANY:	TITLE_	SUPERVISOR DISTRIC	DATE	MAY 4	19/6

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