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NEW MEXICO OIL CONSERVATION COMMISSION

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

SEP 11 1967

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 checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Skelly Oil Company		8. Farm or Lease Name William Sanders
3. Address of Operator Box 730 - Hobbs, New Mexico		9. Well No. 2
4. Location of Well UNIT LETTER F , 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 1 TOWNSHIP 14-S RANGE 33-E NMPM.		10. Field and Pool, or Wildcat Lazy "J" Penn
15. Elevation (Show whether DF, RT, GR, etc.) Unknown		12. County Lea

16. 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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <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.

Spudded well on August 31, 1967. Set 9 jts. (360') of new 11-3/4" 60 31.20# Armco SW SJ casing at 371'. Cemented with 400 sacks regular cement by pump and plug process. Plug down 11:30 a.m. 9-1-67. Cement circulated to surface. WOC 24 hours. Tested casing to 600# for 30 minutes and tested OK. Drilled plug and tested casing to 600# for 30 minutes and casing shut-off tested OK.

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

SIGNED (Signed) V. B. Fletcher TITLE District Superintendent DATE September 6, 1967

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: