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# 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.
<b>B-7893</b>

## 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"/>	7. Unit Agreement Name
2. Name of Operator	<b>Lovington Padlock Unit</b>
3. Address of Operator	8. Farm or Lease Name
<b>SKELLY OIL COMPANY</b>	<b>-----</b>
4. Location of Well	9. Well No.
<b>P.O. Box 730 - Hobbs, New Mexico 88240</b>	<b>4</b>
UNIT LETTER <b>N</b> , <b>660</b> FEET FROM THE <b>South</b> LINE AND <b>660</b> FEET FROM	10. Field and Pool, or Wildcat
THE <b>West</b> LINE, SECTION <b>25</b> TOWNSHIP <b>16-S</b> RANGE <b>36-S</b> NMPM.	<b>Lovington Padlock</b>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
<b>3857' RT</b>	<b>Lea</b>

16.

## Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

OTHER **Convert well to Water Injection** ☒

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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.

**We plan to pull the rods and tubing out of this well. We will then install Water Injection Equipment and inject water through open hole section 6130- 6277' into the Padlock Formation.**

**This well will be a Water Injection Well for the Lovington Padlock Unit, which is operated by Shelly Oil Company.**

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

(SIGNED) **V. E. Fletcher**

SIGNED

TITLE **District Superintendent**

DATE

**11 1967**

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL  
SIGNED  
ENG.

DATE

**11 1967**

