.O. OF COPIES RECEIVED		,	Form C-103
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION		Supersedes Old C-102 and C-103
SANTA FE			Effective 1-1-65
FILE			
U.S.G.S.	_		State State Fee
LAND OFFICE			5. State Oil & Gas Lease No.
OPERATOR			5. State Oil & Gds Ledse No.
			mmmmm.
SUND (DO NOT USE THIS FORM FOR PI USE "APPLICA			
<del></del>	TION FOR PERMIT - " (FORM C-101) FOR	SUCH PROPOSALS.)	7. Unit Agreement Name
OIL GAS WELL OTHER-Salt Water Disposal  2. Name of Operator  Skelly Oil Company			
			8. Farm or Lease Name
			Abo SWD System
3. Address of Operator	auy		9. Well No.
P. O. Box 730 - Hobbs, New Mexico 88240			1
4. Location of Well	MODE NOW INCHES		10. Field and Pool, or Wildcat
light	2310 FEET FROM THE north	LINE AND 2626 FEET FRO	Lovingto n Abo
UNIT LETTER	FEET FROM THE	LINE AND PEET TA	
West we see	TION TOWNSHIP	168 RANGE 37E NMP	" (
THE HOUSE LINE, SECT	ION IOWNSHIP	NAME -	
	15. Elevation (Show whet	ther DF, RT, GR, etc.)	12. County
	3839' DF		les ()()()
16. Check	Appropriate Box To Indicat	e Nature of Notice, Report or C	Other Data
	INTENTION TO:		NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	A = 4 34 m =
	r	OTHER Perforate and	Acidize
OTHER			
17 Describe Proposed or Completed	Operations (Clearly state all pertinent	details, and give pertinent dates, includi	ing estimated date of starting any proposed
work) SEE RULE 1103.			
1) Moved in and rigged t	ip workover rig 2-12-69	•	
2) Pulled tubing and page	:ker.		
3) Perforated 5-1/2"OD	asing as follows:		
•••	- 9735' - 5 shots		
	- 9783' - 13 shots		
	- 9980' - 8 shots		
	-10046' - 6 shots		
10,100	-10175' - 75 shots	h Bakan Wash-Bat" nacka:	r at 96641.
4) Ran 309 jts. (9664')	or z-//8.00 cosing wit	h Baker "Lock-Set" packer	with 4,000 gals. 15% acid
5) Treated down tubing	futo 2-1/5.08 castra be	Horactons 3/30-10,800	2000 0000
4250 Lbs. rock salt	in stages.	niecting at rate of 5 bb	ls. per minute through 5-1
6) Returned well to injury	ns 9730-10,260' into th	e Abo Formation.	
Ob casing perioracion	18 9/30-10,200 Lites ell		
18. I hereby certify that the informati			
	on above is true and complete to the b	est of my knowledge and belief.	
(ORIGINAL) V. I	. Fletcher		
ORIGINAL V. I	. Fletcher	est of my knowledge and belief.	er DATE 2-26-69
(ORIGINAL) V. I	. Fletcher		
(ORIGINAL) V. I	. Fletcher	listrict Production Manag	
(ORIGINAL) V. I	. Fletcher		ET DATE 2-26-69
ORIGINAL V. I	Fletcher TITLE	listrict Production Manag	