-	Г	Form C-103
NO. OF COPIES RECEIVED	-	Supersedes Old
DISTRIBUTION		<i>C-102 and C-103</i> Effective 1-1-65
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		5a. Indicate Type of Lease
U.S.G.S.		
LAND OFFICE	-	5. State Oil & Gas Lease No.
OPERATOR		
DO NOT USE THIS FORM FOR PE USE "APPLICA	RY NOTICES AND REPORTS ON WELLS IOPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. TION FOR PERMIT	
1.		7. Unit Agreement Name
OIL GAS WELL	OTHER-	Lovington Paddook Unit
2. Name of Operator		8. Farm or Lease Name
STELLY OIL COPANY		
3. Address of Operator		9. Well No.
	P. O. Box 730 - Hobbs, New Mexico 88240	70
4. Location of Well		ru, ricia and root, or allocation
	614 FEET	Lovington Paddock
UNIT LETTER		
	TON 6 TOWNSHIP 17- 8 RANGE 37- 8	(MPM. ())))))))))))))))))))))))))))))))))))
THE UNE, SECT	ION TOWNSHIP RANGE	
innin mininin in the second	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3822' 1	
	Appropriate Box To Indicate Nature of Notice, Report o	r Other Data
		JENT REPORT OF:
NOTICE OF	INTENTION TO: SUBSEQU	
<b></b>		ALTERING CASING
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	PLUG AND ABANDONMENT
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JQB	ـــــــــــــــــــــــــــــــــــــ
	other Intection	
OTHER CHEVET WELL t	o Water Injection X	
	Operations (Clearly state all pertinent details, and give pertinent dates, inc	luding estimated date of starting any proposed

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 even hole section 6131-6250' into the Paddock Formation.

This well will be a Water Injection Well for the Lowington Paddock Unit, which is operated by Skelly Oil Company.

18. I hereby certify that the information above is true and complete	e to the best of my knowledge and belief.	
$\begin{pmatrix} ORLGINGL \\ SIGNED \end{pmatrix}$ V. E. Fletcher		
SIGNED /	TITLE Bistrict Superintendent	DATE

• : TITLE \_\_\_\_

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY \_\_\_\_