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NEW MEXICO OIL CONSERVATION COMMISSION

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

DEC 16 1 03 PM '66

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No. _____
7. Unit Agreement Name Lovington Paddock Unit
8. Farm or Lease Name _____
9. Well No. 68
10. Field and Pool, or Wildcat Lovington Paddock
12. County Lea

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"/>
2. Name of Operator Skelly Oil Company
3. Address of Operator P. O. Box 730, Hobbs, New Mexico
4. Location of Well UNIT LETTER K , 1980 FEET FROM THE South LINE AND 1890 FEET FROM THE West LINE, SECTION 6 TOWNSHIP 17-S RANGE 37-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3818' DF

16.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

PLUG AND ABANDON ☐
CHANGE PLANS ☐

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

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
Convert well to water injection ☒

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.

Moved in and rigged up pulling unit and pulled rods and tubing. Ran 2" tubing and set packer at 6039'. Water injection equipment was installed and water will be injected into the Paddock Formations through open-hole section 6120-6250'.

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

SIGNED **(ORIGINAL SIGNED) H. E. Aal** TITLE **District Superintendent** DATE **December 14, 1966**

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