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LAND OFFICE		
OPERATOR		

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 Fee

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name
L. Van Etten

9. Well No.
1 1

10. Field and Pool, or Wildcat
Lunice-Monument

12. County
Lea

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REEVAL OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL GAS WELL OTHER **Temporarily Abandoned**

2. Name of Operator
Skelly Oil Company

3. Address of Operator
P. O. Box 1351, Midland, Texas 79701

4. Location of Well
UNIT LETTER **L**, **1980** FEET FROM THE **South** LINE AND **660** FEET FROM
THE **West** LINE, SECTION **9** TOWNSHIP **20S** RANGE **37E** N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
3552' DF

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER Casing Connections <input checked="" 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.

Riser on 13" OD and 9-5/8" OD Casing brought to surface.
Riser on 9-5/8" OD and 7" OD Casing brought to surface.
Inspected by J. W. Runyan on 5-27-76.

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

SIGNED **(Signed) E. R. Crow** **D. R. Crow** TITLE **Lead Clerk** DATE **6-9-76**

APPROVED BY **John D. Sutton** TITLE **Dist. L. Supv.** DATE _____

CONDITIONS OF APPROVAL, IF ANY: