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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 <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

7. Unit Agreement Name	

8. Farm or Lease Name	
L. Van Etten	
9. Well No.	
10	
10. Field and Pool, or Wildcat	
Eumont	
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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator
	Skelly Oil Company
3. Address of Operator	
	P. O. Box 1351, Midland, Texas 79701
4. Location of Well	
UNIT LETTER <u>0</u> , <u>990</u> FEET FROM THE <u>South</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>9</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	
	3553' DF

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <u>Locate and repair 7" OD casing leaks</u> <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input 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.

- 1) Move in workover rig. Pull tubing.
- 2) Locate leak interval in 7" OD casing.
- 3) Cement squeeze casing leak interval or conduct further tests as indicated by conditions found in well.
- 4) Return well to producing status, flowing Eumont open hole 3400-3781'.

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

(Signed) D. R. Crow

SIGNED D. R. Crow TITLE Lead Clerk DATE 2-19-75

APPROVED BY _____ TITLE _____ DATE FEB 21 1975

CONDITIONS OF APPROVAL, IF ANY: