NO. OF COPIES MECCIFYED					
DISTRIBUTION	= · · · · · · · · · · · · · · · · · · ·				Form C-103 Supersedes Old
SANTAFE					C-102 and C-103
FILE		012 (011.	DEKANTION COMMISSION		Effective 1-1-65
U.S.G.S.				( <del></del>	
LAND OFFICE				2a	. Indicate Type of Lease
OPERATOR				ļ	State Fee
				5.	State Oil & Gas Leaso No.
ZUMUSY	MOTICES AND DE	DOUTE			
LLO NOT USE THIS FORM FOR THE TACKS	TO FICES AND RE	LOK 12 ON	WELLS		
I .	THE PERSON OF TH	2-1011 FCR ST	(FAUPOSALD.)		
WELL X. WELL X	orner. Dual C	, , , , , , , , , , , , , , , , , , , ,		7.	Unit Agreement Name
2. Name of Operator	Dual C	ompletion	1		
Skelly Oil Company				8.	Farm or Lease Harne
3. Address of Operator					Van Etten
P O Boy 1351 Midland	To 70701			9.	Well No.
P. O. Box 1351, Midland,	1exas /9/01				1 12
UNIT LETTER 0 , 810	FEET FROM THE	South	LINE AND2130	10. WE FEET FROM MC	Field and Pool, or Wildcat eir Blinebry & nument Tubb
		•		1	
THE East LINE, SECTION	9 TOWNS	20S	RANGE 37E	NMPM.	
TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT				- "W.	
	15. Elevation (3	Show whether	DF, RT, GR, etc.)	12.	County
(4)		3554' DF		Le	ea (1111111
Check Ap	propriate Box To	Indicate N	ature of Notice, Repor	cs on Oaksa I	7777777
NOTICE OF INT	ENTION TO:	1	super	TOLOUGH I	Jata
			30638	EQUENT RE	PORT OF:
PERFORM REMEDIAL WORK	PLUG AND A	BANDON T	REMEDIAL WORK	$\Box$	
TEMPORARILY ABANDON			COMMERCE DRILLING OPNS.	H	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLA	us [	CASING TEST AND CEMENT JOB	<del> - </del>	PLUG AND ABANDONMENT
			OTHER Casing Con		
OTHER	·		01.424 <u>00.02118</u> 001	meetions	
17. Describe Proposed or Completed Opera work) SEE RULE 1103.	itions (Clearly state all	pertinent deta	ils, and give pertinent dates,	including estim	ated date of storting any prop
					es sy comitting any prop
Riser on 8-5/8" OD and 5-	1/2" OD Casing	brought	to surface.		
Inspected by J. W. Runyan	on 5-27-76.				
1					
18. I hereby certify that the information above	ve is true and complete	a the best of	my traculation of the second		
	and complete t	- the new [0]	my knowledge and belief.		
(Signed) D. R. Crow	D. R. Crow	7	ond 01± 1		
3 IGNED 1	7. K. GLUW	TITLE	ead Clerk		6-9-76
	· • • • • • • • • • • • • • • • • • • •				
APPROVED BY	<u> </u>	TITLE	,		TF co.
CONDITIONS OF APPROVAL, IF ANY:		•			A SAME A STATE OF THE SAME AS A SAME A