NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION	:	Supersedes Old
SANTAFE	NEW MEXICO OIL CONSERVATION CO	C-102 and C-103 DMMISSION Effective 1-1-65
U.S.G.S.	he 13	5a. Indicate Type of Lease
LAND OFFICE	Util 10	
OPERATOR		State State Oil & Gas Lease No.
		5. State Off & Gds Ledge No.
SUNDR	Y NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PRO USE "APPLICAT	RY NOTICES AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERE 10N FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	NT RESERVOIR.
l. OIL THE GAS WELL THE WELL THE THE TRANSPORTER TO		7. Unit Agreement Name
2. Name of Operator	OTHER-	8. Form or Lease Name
Skelly GLI	Gerrany	es a company of the second second
3. Address of Operator	and the same of th	9. Well No.
Р. О. Нок 7	30 - Robbs, New Marken	3
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER	660 FEET FROM THE BOTTH LINE AND	996 FEET FROM LEUZIO METELX
THE BOOK	19 44 6	37.7
LINE, SECTIO	ON TOWNSHIP RANGE	NMPM. (())
	15. Elevation (Show whether DF, RT, GR, etc.	12. County
	3373' DF	I-02
Check A	Appropriate Box To Indicate Nature of Noti	ce, Report or Other Data
NOTICE OF IN	TENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	51.115 AUG AUG AUG AUG	
TEMPORARILY ABANDON	PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILL	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND	The state of the s
	OTHER	
OTHER CONVERTS WELL SO	valor injectate	
17. Describe Proposed or Completed Ope	erations (Clearly state all pertinent details, and give pert	inent dates, including estimated date of starting any proposi
work) SEE RULE 1703.		The same of companies and proposes
· Wi plan to p	ull the ross and tebing out of thi	a wall. We will that install
Marck Inject	for Equipment and inject water the	233 Paris. 3594 through or or
3792	into the Perrose Ro	enstica.
ాండించిన అంటుంచింది. గూని	ll be a Weter Injection Well for t	To an 1985 in 8 8 mar. Burgon war man 1986 1988. Bling of C
	mated by Skelly Cil Company.	and the second of the second o
ട് വാഗക്കും ക്യൂഷ	to be to the control of the control	
	i	
18. I hereby certify that the information a	bove is true and complete to the best of my knowledge an	nd belief.
MORIGINAL) LE	E. Aab	
SIGNED SIGNED A	TITLE BESTREE Sup	erintendent date July 11, 1966
	1	
PPROVED BY	• • • • • • • • • • • • • • • • • • •	
CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE