

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

1966 JUL 18 '66

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

SUNDY 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"/>	7. Unit Agreement Name
2. Name of Operator Skelly Oil Company	8. Farm or Lease Name Coats
3. Address of Operator Box 730 - Hobbs, New Mexico	9. Well No.
4. Location of Well UNIT LETTER H 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 3 TOWNSHIP 24-S RANGE 36-E NMPM.	10. Photo and Book, or Width
15. Elevation (Show whether DF, RT, GR, etc.) 3402' DF	12. County Lea

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 <input type="checkbox"/> Drill deeper and treat

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 JOBS <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.

This well is presently a shut in gas well. We now plan to recomplete in the following manner:

1. Move in and rig up Workover Rig.
2. Pull tubing.
3. Clean well out to old Total Depth 3578'.
4. Deepen well from 3578' to approx. 3900'.
5. Treat open hole section 3536-3900' with approx. 5000 gals. acid.
6. Swab and test well.
7. Return well to a producing status.

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

SIGNED **(ORIGINAL) H. E. Asb** TITLE **Dist. Superintendent** DATE **July 18, 1966**

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

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILL	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
MISCELLANEOUS REPORTS ON WELLS

FORM C-103
(Rev 3-55)

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company Skelly Oil Company				Address Box 730 - Hobbs, New Mexico			
Lease E Coats		Well No. 3	Unit Letter MM	Section 3	Township 24-S	Range 36-E	
Date Work Performed		Pool Jalnet			County Lea		

THIS IS A REPORT OF: (Check appropriate block)

- | | | |
|--------------------------------------------------------|-----------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Beginning Drilling Operations | <input type="checkbox"/> Casing Test and Cement Job | <input checked="" type="checkbox"/> Other (Explain): |
| <input type="checkbox"/> Plugging | <input type="checkbox"/> Remedial Work | Well Status Report - January 1, 1965 |

Detailed account of work done, nature and quantity of materials used, and results obtained.

This well was shut down on July 1, 1962. We have no plans for this well in the immediate future.

Witnessed by	Position	Company Skelly Oil Company
--------------	----------	--------------------------------------

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION		I hereby certify that the information given above is true and complete to the best of my knowledge.	
Approved by		Name H. E. Aab	
Title		Position Dist. Supt.	
Date		Company Skelly Oil Company	