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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
 Supersedes Old  
 C-102 and C-103  
 Effective 1-1-65  
 JUN 30 3 13 PM '67

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

5a. Indicate Type of Lease	State <u>TX</u>	Fee <u>XX</u>
5. State Oil & Gas Lease No.		
7. Unit Agreement Name		
8. Farm or Lease Name		
9. Well No.		
10. Field and Pool, or Wildcat		
12. County		

## 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator	3. Address of Operator	4. Location of Well
UNIT LETTER <u>D</u> , <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>4</u> TOWNSHIP <u>23N</u> RANGE <u>17E</u> NMPM.			
15. Elevation (Show whether DF, RT, GR, etc.)			
3353' <u>RT</u>			

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

PERFORM REMEDIAL WORK ☐  
 TEMPORARILY ABANDON ☐  
 PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐  
 CHANGE PLANS ☐

OTHER Convert well to water injection ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
 COMMENCE DRILLING OPNS. ☐  
 CASING TEST AND CEMENT JOB ☐

ALTERING CASING ☐  
 PLUG AND ABANDONMENT ☐

OTHER ☐

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.

We plan to pull the rods and tubing out of this well. We will then install Water Injection equipment and inject water through 5-1/2" CD Casing perfs. 3566-3692' into the Permian Formation.

This well will be a Water Injection Well for the Skelly Permian Unit, which is operated by Skelly Oil Company.

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

SIGNED [Signature] TITLE District Superintendent

DATE JUN 29 1967

APPROVED BY [Signature] TITLE [Signature]

DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY: