

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

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 Skelly Penrose "B" Unit
9. Well No. 29
10. Field and Pool, or Wildcat Langlie Mattix
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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- Injection Well
2. Name of Operator Skelly Oil Company
3. Address of Operator P. O. Box 1351, Midland, Texas 79701
4. Location of Well UNIT LETTER H 2112 FEET FROM THE N LINE AND 660 FEET FROM THE E LINE, SECTION 5 TOWNSHIP 23S RANGE 37E NMPM.
15. Elevation (Show whether DF, RT, CR, etc.) 3348 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 <input 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 Casing Connections <input checked="" 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.

**Riser on 10-3/4" and 5-1/2" casing brought to surface
Inspected by L. A. Clements 1-6-75**

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

SIGNED **(Signed) D. R. Crow** **D. R. Crow** TITLE **Lead Clerk** DATE **1-22-75**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: