

Submit 3 Copies  
to Appropriate  
District Office  
District I  
P.O. Box 1980, Hobbs, NM 88240  
District II  
P.O. Drawer DD, Artesia, NM 88210  
District III  
1000 Rio Brazos Rd. Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30 - 025 - 10645

5. Indicate Type of Lease  
STATE  FEE

6. State Oil & Gas Lease No.

**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.)

7. Lease Name or Unit agreement Name

SKELLY PENROSE B UNIT

1. Type of Well:  
OIL WELL  GAS WELL  OTHER INJECTION

8. Well No. 39

2. Name of Operator OXY USA INC.

9. Pool name or Wildcat  
LANGLIE MATTIX 7 RVR QN-GB

3. Address of Operator  
P.O. Box 50250 Midland, TX 79710

4. Well Location  
Unit Letter O : 660 Feet From The SOUTH Line and 1,980 Feet From The EAST Line  
Section 5 Township 23 S Range 37 E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3,330

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: CONVERT TO INJECTION <input checked="" type="checkbox"/>		OTHER: CONVERT TO INJECTION <input checked="" type="checkbox"/>	

12. 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.

TD - 3705' PBDT - 3705' PERFS - 3554' - 3685'

MIRU PU 8/4/93, POOH W/ RODS & PUMP, NDWH, NUBOP, RIH & TAG @ 3698', CHC. ACIDIZE W/ 3000 GAL 15% NEFE HCL ACID. POOH, RIH W/ GUIB C-6 PKR & 2-3/8" TBG & SET @ 3499', CIRC W/ PKR FLUID, NDBOP, NUWH, RDPD 8/5/93. TEST CSG TO 500# 11/15/93 PRIOR TO WATER INJECTION.

START WATER INJECTION 11/23/93 @ 146 BWPD @ 550#  
7606

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

SIGNATURE David Stewart TITLE REGULATORY ANALYST DATE 06 10 94  
TYPE OR PRINT NAME DAVID STEWART TELEPHONE NO. 915 685-5717

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JUN 14 1994

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 1961

JOHN HOBBS  
OFFICE

