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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

406 7 27 AM '68

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

7. Unit Agreement Name	
Skelly Penrose "B"	
8. Farm or Lease Name	

9. Well No.	
36	
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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection
2. Name of Operator Skelly Oil Company
3. Address of Operator P. O. Box 730 - Hobbs, New Mexico 88240
4. Location of Well UNIT LETTER 'P' 660 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 6 TOWNSHIP 23S RANGE 37E N.M.P.M.
15. Elevation (Show whether DF, RT, GR, etc.) 3362' KB

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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"/>	OTHER Perforate & Treat <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <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.

1. Pull injection tubing and packer.
2. Run workover tubing with 4-3/4" bit and drill cement from 3766' to 3778'. Pull tubing & bit.
3. Run Gamma Ray & Neutron Logs.
4. Perforate 5-1/2"OD casing.
5. Run workover tubing and packer and spot acid.
6. Treat new perforations with 1500 gals. BDA and ball sealers.
7. Flow back acid water and balls.
8. Pull workover tubing and packer. Run injection tubing and packer.
9. Return to injection status.

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

SIGNED **(ORIGINAL) V. E. Fletcher** TITLE **District Production Manager** DATE **8-5-68**

APPROVED BY **John W. Ryan** TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: