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# 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.   |   |

## 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 <input type="checkbox"/> GAS <input type="checkbox"/> OTHER- <b>Injection Well</b>   |  | 7. Unit Agreement Name                                   |
| 2. Name of Operator<br><b>Skelly Oil Company</b>  |  | 8. Field or Lease Name<br><b>Skelly Penrose "B" Unit</b> |
| 3. Address of Operator<br><b>P. O. Box 1351, Midland, Texas 79701</b>   |  | 9. Well No.<br><b>61</b>                                 |
| 4. Location of Well<br>UNIT LETTER <b>N</b> <b>660</b> FEET FROM THE <b>S</b> LINE AND <b>1980</b> FEET FROM<br>THE <b>W</b> LINE, SECTION <b>9</b> TOWNSHIP <b>23S</b> RANGE <b>37E</b> N.M.P.M. |  | 10. Field and Pool, or Wildcat<br><b>Langlie Mattix</b>  |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br><b>3327 DF</b>   |  | 12. County<br><b>Lea</b>                                 |

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 <input type="checkbox"/>            | CASING TEST AND CEMENT JOB <input type="checkbox"/> | OTHER <b>Casing Connections</b> <input checked="" type="checkbox"/> |

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimate of date of starting any proposed work) SEE RULE 1103.

**Riser on 9-5/8" 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) **D. R. Crow**

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

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: