)		
OPIES RECEIVED	7	•	
TRIBUTION			Form C-103
FE			Supersedes Old C-102 and C-103
FILE	NEW MEXICO OIL CON	SERVATION COMMISSION	Effective 1-1-65
U.S.G.S.	4		
LAND OFFICE	4		5a. Indicate Type of Lease
OPERATOR	-		State Fee X
	J		5. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PRI USE "APPLICAT	RY NOTICES AND REPORTS ON OPOSALS TO DRILL OR TO DEEPEN OR PLUG TION FOR PERMIT -" (FORM C-101) FOR SU	I WELLS BACK TO A DIFFERENT RESERVOIR. CH PROPOSALS.)	
			7. Unit Agreement Name
	OTHER. Dual Gas Well a	nd Water Injection	
2. Name of Operator			8. Farm or Lease Name
Skelly Oil Company			J. C. Johnson
3. Address of Cperator			9. Well No.
P. O. Box 1351, Midland, Texas 79701			4
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER D	560 FEET FROM THE North	660	Langlie-Mattix, Jalmat Gas
THELINE, SECTION	20 TOWNSHIP 235	37E	
	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
	3315'	DF	Lea
Check	Appropriate Box To Indicate N	ature of Notice Report of	Other Date
NOTICE OF IN	TENTION TO:		ENT REPORT OF:
		3083200	ENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JQB	PLUG AND ABANDONMENT
OTHER CONVERT Langlie-M	attix Zone to Water IV	OTHER	
Injection Well			
17. Describe Proposed or Completed Op- work) SEE RULE 1103.	erations (Clearly state all pertinent dete	zils, and give pertinent dates, inclu	ding estimated date of starting any proposed

Approval for conversion of Langlie-Mattix Zone to water injection was given in New Mexico

Oil Conservation Commission Order No. R-4785, dated May 21, 1974. The proposed work is as

- Move in workover rig. Pull rods and tubing. 1)
- Clean out and run Gamma Ray Neutron Log. 2)
- Run 2-3/8" OD internally-coated injection tubing and set packer at approximately 3375'. 3) 4)
- Connect well to injection system and commence injection in Langlie-Mattix Zone.

stgned) D. R. Crow	D. R. Crow Lead Clerk	7-2-74
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	Orig. Signod by Joe D. Ramey TITLE Dist. I. Supy.	DATE