NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION		Supersedes Old
SANTA FE			C-102 and C-103 Effective 1-1-65
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State XX Fee
OPERATOR			5. State Oil & Gas Lease No.
			B-9312
SUND	ORY NOTICES AND REPORTS ON W ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAC ATION FOR PERMIT -" (FORM C-101) FOR SUCH	ELIS	
USE "APPLIC	ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAC ATION FCR PERMIT — " (FORM C-101) FOR SUCH	K TO A DIFFERENT RESERVOIR. PROPOSALS.)	
l.			7. Unit Agreement Name
WELL WELL	OTHER- Water Injection	West Do	ollarhide Queen Sand Unit
2. Name of Operator			8. Farm or Lease Name
Skelly Oil Company		West Do	ollarhide Queen Sand Unit
3. Address of Operator			9. Well No.
P. 0. Box 1351, Midla	nd, Texas 79701		59
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER K	1942 FEET FROM THE North	660	
	THOM THE STATE OF	FEET F	ROW DOTTALINGE OFFER
THE West LINE SECT	10N 5 TOWNSHIP	2017	
LINE, SECT	TOWNSHIP 235	RANGE 38E NM	(PM- (
	15. Elevation (Show whether DI	F, RT, GR, etc.)	12. County
		3121' DF	
16. Chaole	Appropries Des T. I. I.		Lea
NOTICE OF	Appropriate Box To Indicate Nat		
NOTICE OF	INTENTION TO:	SUBSEQUE	ENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON F	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		OMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	ASING TEST AND CEMENT JOB	
	_	OTHER	
OTHER			
17. 0			
work) SEE RULE 1103.	perations (Clearly state all pertinent details	, and give pertinent dates, includ	ling estimated date of starting any proposed
1) Rigged up pulling	unit 12-27-72. Pulled tub	ing and nacken	
2) Set 7" bridge plus	at 2575?	ing and packer.	
	ment plug 3500-3575'.		
	ement plug 1060-1542'.		
	ment plug Surface-25'.		
7) Set marker.			
All intervals not ceme	ented were filled with 10.2	# mud. No casing wa	us pulled. 9-5/8"
OD 36# casing set at 1	171' and 7" OD 20# casing	set at 3605' were le	ff in the hole.
· ·			
Well plugged and aband	oned 12-29-72		
Pre8900 and abanc	oned II Ly / Z.		
8. I hereby certify that the information	above is true and complete to the best of m	y knowledge and belief.	
(Sight a) 2	D. R. Crow	L <b>e</b> ad Clerk	Jan. 29, 1973
IGNED	D. R. Crow		DATE
	1		
	1.00		5 3 1995 mas
PPROVED BY	TITLE		DATE
CONDITIONS OF APPROVAL, IF ANY	•		