NO. OF COPIES RECEIVED	'		Form C-103		
DISTRIBUTION			Supersedes C-102 and		
SANTA FE	NEW MEXI	CO OIL CONSERVATION COMMISSION $\phi_{i} _{\partial_{i}}$	Effective 1	-1-65	
FILE		per 11	5a. Indicate Ty	vne of Lease	
U.S.G.S.	+	128 j 1 3 31 167	State X	Fee Fee	
LAND OFFICE OPERATOR	+	. 41		Gas Lease No.	
OFERATOR	<u></u>		B-9311	L	
- CI	INDRY MOTICES AND D	EDODIS ON WELLS	IIIIII	illillillilli.	
(DO NOT USE THIS FORM FOUR "APP	OR PROPOSALS TO DRILL OR TO D PLICATION FOR PERMIT =" (FORM	EPORTS ON WELLS EEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. C-101) FOR SUCH PROPOSALS.)			
1.			7. Unit Agreen	nent Name	
OIL GAS WELL WELL	OTHER-				
2. Name of Operator			1	8. Form or Lease Name	
Skelly Oil Company) "J"	
3. Address of Operator	B 0 Bon 730	Hobbs, New Mexico	9. Well No.		
4. Location of Well	F.U. BUX /30,	BODDS, EW NEXTCO		Pool, or Wildcat	
•	810	E South LINE AND 510 FEET FR	Bollark	ide Drinkard	
UNIT LETTER	FEET FROM TH	E JOUET LINE AND JAO FEET FR	<i>1111111</i> **		
East	SECTION 32 TOWN	ISHIP 248 RANGE 38E NMF			
THE LINE,	SECTION TOWN	RANGERANGE	<u> </u>		
	15. Elevation	(Show whether DF, RT, GR, etc.)	12. County		
		3180' DF	Lea	/////////////////////////////////////	
The Che	eck Appropriate Box T	o Indicate Nature of Notice, Report or C	Other Data		
NOTICE	F INTENTION TO:	SUBSEQUE	NT REPORT O	F:	
PERFORM REMEDIAL WORK	PLUG AN	D ABANDON REMEDIAL WORK		TERING CASING	
TEMPORARILY ABANDON	TEMPORARILY ABANDON COMMENCE DRILLING OPNS.			G AND ABANDONMENT	
PULL OR ALTER CASING	CHANGE	PLANS CASING TEST AND CEMENT JOB OTHER Pull bridge plu	er emin to	num å	
		OTHER	A) equip co	, post 4	
OTHER					
	ted Operations (Clearly state o	ill pertinent details, and give pertinent dates, include	ing estimated date	of starting any proposed	
work) SEE RULE 1103.					
1. Moved in a	nd rigged up worko	ver unit.			
		and pulled Baker Retrievable bri	ldge plug se	t at 6310'.	
	11 out to 6828'.				
	nd set 213 joints	(6589') of 2-3/8"OP tubing at (598'. Inst	alled pumping	
equipment.					
5. Pumped and					
		status April 7, 1967.			
(Well is p	roducing through a	ll perforations and open hole).			
				·	
18. I hereby certify that the information	nation above is true and compl	ete to the best of my knowledge and belief.			
			_		
SIGNED	<u> </u>	TITLE District Superintendent	DATE AP	ril 10, 1967	
	/ · — <u>- · · · · · · · · · · · · · · · · · · </u>				
				•	
APPROVED BY	<u> </u>	TITLE	DATE		
CONDITIONS OF APPROVAL, I	ANY:				