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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

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-9311
7. Unit Agreement Name
8. Farm or Lease Name
9. Well No. 61
10. Field and Pool, or Wildcat
12. County

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-
2. Name of Operator SKALLY OIL COMPANY
3. Address of Operator P.O. Box 1351, Dolarhide, New Mexico
4. Location of Well UNIT LETTER J , 1980 FEET FROM THE south LINE AND 1980 FEET FROM THE east LINE, SECTION 32 TOWNSHIP 24S RANGE 38E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3195 R.T.

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input 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.

- Moved in and rigged up workover rig 10-30-69.
- Pulled rods and tubing.
- Ran cement lined tubing and set packer at 5846'.
- Loaded casing annulus behind tubing with water treated with inhibitors.
- Connected well to injection system and began injecting water 11-1-69, into perforations 6396' to 6574', of the Drinkard formation.

This is a water injection well for the West Dolarhide Drinkard Unit operated by Skally Oil Company

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

SIGNED _____

TITLE **Supervisor District Manager**

DATE **11-5-69**

APPROVED BY _____

TITLE **SUPERVISOR DISTRICT**

DATE **NOV 7 1969**

CONDITIONS OF APPROVAL, IF ANY: