NO. OF COPIES RECEIVED							C-103		
DISTRIBUTION						Supersedes Old C-102 and C-103			
SANTA FE	_	_ и	EM WEXICO OIL	CONSERVATION CO	MMISSION	Effec	tive 1-1-65		
FILE		-				Sa India	ate Type of Lease		
U,\$.G.\$.		4				State			
LAND OFFICE		_			•	L	Oil & Gas Leane No.	ee 🗶	
OPERATOR						3, 5tate	on a dus peuse no.	•	
						iii -	mmm.	m	
(DO NOT USE THIS	SUND	RYNOTICES	SAND REPORT	S ON WELLS Flug back to a differe	ENT RESERVOIR.				
. v	SE "FPLICA	TION FOR FEBRUAT	(_** (FORM C-101) F	OR SUCH PROPERALS.)		7, Unit /	agreement Name		
OIL WELL W	ELL X	OTHER-	,						
2. Name of Operator							or Lease Name		
Skelly Oil Company							rty Royaltie	•	
3. Address of Operator							o.	¥	
P. O. Box 1351	. Midla	nd. Texas	79701			5			
4. Location of Well							10. Field and Pool, or Wildest		
UNIT LETTER		1650 FE	ET FROM THE SOL	sth LINE AND	1650 FE	ET FROM Jain	at Yates		
			•						
THE Kast	_ LINE, SECT	10N 7	TOWNSHIP	24S RANGE	37E	_ имрм.			
	****							7777	
	111111	[]]]]]} 15.		hether DF, RT, CR, etc	:.)	12, Cour	(A		
	7/7/7/	71/77/7	331	L4' DF		Lea		77777	
16.	Check	Appropriate	Box To Indica	nte Nature of Not	ice, Report	or Other Data			
гои	TICE OF I	INTENTION :	TO:	1	SUBSE	QUENT REPOR	RT OF:		
	-				•	·			
PERFORM REMEDIAL WORK	닏		PLUG AND ABANDON				ALTERING CASING	님	
TEMPORARILY ABANDON	닏			COMMENCE DRIL	i		PLUG AND ASANDONS	MENT []	
PULL OR ALTER CASING			CHANGE PLANS	CASING TEST A	TO CEMENT JOB				
OTHER Set 3-1/	att on a	1_44_3 14_		T OTHER					
·					_				
17. Describe Proposed or	Completed (perations (Clea	irly state all pertine	nt details, and give pe	rtinent dates, i	ncluding estimated	date of starting any	proposed	
work) SEE RULE 110	э.								
		•							
1) Move in wor	kover r	1 e.							
2) Clean out t	_	_			•				
3) Set 19 join			OD J-55 Flus	sh Joint slotte	ed casing	liner 2700-	3260'.		
4) Return well	to pro	ducing sta	tus flowing	Jalmat Yates	open hole	thru slotte	d liner 2730	-3260	
				•					
					•				
						•			
					•				
18. I hereby certify that th	ne informatio	n above is true	and complete to the	best of my knowledge	and belief.				
18. I hereby certify that the									
		D. R. Cro		Tood Cla		DATE	3-12-76		
(Signea) D.				Tood Cla		DATE	3–12–76	The state of the s	
, ,	n. Cicw			Tood Cla		DATE	3-12-76 110-11 1 3	1	

CONDITIONS OF APPROVAL, IF ANY: