

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

*C/S
OP*

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-015-01251
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-5313

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Lease Name or Unit Agreement Name EMPIRE ABO UNIT "H"
2. Name of Operator ARCO Permian	8. Well No. 19
3. Address of Operator P.O. Box 1089 Eunice, NM 88231	9. Pool name or Wildcat EMPIRE ABO
4. Well Location Unit Letter <u>0</u> : <u>660</u> Feet From The <u>S</u> Line and <u>1920</u> ¹⁴⁶⁰ Feet From The <u>E</u> Line Section <u>36</u> Township <u>17S</u> Range <u>27E</u> NMPM <u>EDDY</u> County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3652' GL

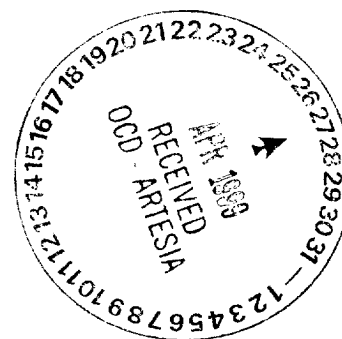
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>MIT</u> <input checked="" type="checkbox"/>	

12. 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.

TD: 6200' PBD: 5919' PERFS: 5648-5882'

3/25/99: CSG MIT WITNESSED BY KEN LIVINSTON - NMOCD, AND KENT WHITMIRE - ARCO. PRESS TESTED TO 460#. HELD 15 MINS. HELD OK. CHART ATTACHED.



This Approval of Temporary Abandonment Expires 2004

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE Kellie D. Murrish TITLE Administrative Assistant DATE 4/16/99
TYPE OR PRINT NAME Kellie D. Murrish TELEPHONE NO. 505-394-1649

(This space for State Use)
APPROVED BY Jim W. Green TITLE District Supervisor DATE 4-30-99
CONDITIONS OF APPROVAL, IF ANY: