

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-79

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DISTRIBUTION	
SANTA FE	1
FILE	1 ✓
U.S.O.A.	
LAND OFFICE	
OPERATOR	1

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No.	
B-7596	

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 ☒ GAS WELL ☐ OTHER		7. Unit Agreement Name
2. Name of Operator ARCO Oil and Gas Company Division of Atlantic Richfield Company		8. Farm or Lease Name Robinson Gas Com.
3. Address of Operator Box 1710, Hobbs, New Mexico 88240		9. Well No. 1
4. Location of Well UNIT LETTER E , 1850 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 27 TOWNSHIP 17S RANGE 29E NMPM.		10. Field and Pool, or Wildcat Grayburg Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 3547.3' GL		12. County Eddy

15. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPER. ☐	PLUG AND ABANDONMENT ☒
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	Grbg Morrow Only

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.

RU 5/29/79. Killed well, installed BOP. POH w/compl assy. RIH w/cmt retr, set retr @ 10,800'. Cmt squeezed perfs 10,911-10,929' w/100 sx Cl H cmt cont'g 1/2% Halad followed by 50 sx Cl C Neat cmt. RO 25 sx cmt to pit. Morrow P&A eff 6/3/79.

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

SIGNED [Signature] TITLE Dist. Drlg. Supt. DATE 10/1/79

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE OCT 1 1 1979

CONDITIONS OF APPROVAL, IF ANY: