

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2083  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>E-1582</b>	

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator ARCO Oil and Gas Company Division of Atlantic Richfield Co	8. Farm or Lease Name Lea 403 State
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240	9. Well No. 6
4. Location of Well UNIT LETTER <b>B</b> <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM <b>East</b> THE LINE, SECTION <b>17</b> TOWNSHIP <b>18S</b> RANGE <b>35E</b> NMPM.	10. Field and Pool, or Wildcat Undersignated Bone Springs
15. Elevation (Show whether DF, RT, GR, etc.) 3943' GR	12. County Lea

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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER <u>cement squeeze upper Bone Springs</u> <input checked="" type="checkbox"/> <u>perf lower Bone Springs &amp; treat</u>	

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.

Rig up on 7/23/81. POH w/comp assy. Install BOP. RIH w/cmt retr, set retr @ 8943'. Cmt squeezed perfs 9016-83' w/150 sx Cl C cmt cont'g 2% CaCl<sub>2</sub>. Spot 30' cmt plug on top of retr. Spot 15 gals 15% acid 7813-7837'. Perf 7-5/8" OD csg 7813, 17, 25, 29, 37'. Set pkr @ 7765'. Acidized perfs 7813-37' w/3000 gals 15% HCl-LSTNE acid. Broke @ 3500#. Inj rate 3.7 BPM @ 2350#. ISIP vacuum. 7/29/81 swbd 109 BLW in 5 hrs. Work over unsuccessful. Preparing to P&A.

FINAL REPORT.

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

SIGNED J.W. Schmidt for: J.W. Schmidt TITLE Dist. Drlg. Supt. DATE 7/31/81

APPROVED BY Jerry Santos TITLE  DATE

CONDITIONS OF APPROVAL, IF ANY: