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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  Fee   
5. State Oil & Gas Lease No.

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 - H" (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 Atlantic Richfield Company	8. Farm or Lease Name Ollie J. Boyd
3. Address of Operator P. O. Box 1978, Roswell, New Mexico 88201	9. Well No. 2
4. Location of Well UNIT LETTER <u>D</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>400</u> FEET FROM THE <u>West</u> LINE, SECTION <u>23</u> TOWNSHIP <u>22-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Wildcat Paddock
15. Elevation (Show whether DF, RT, GR, etc.) 3349' DF	12. County Lea

16. 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 <u>Recomplete in Tubb-gas</u> <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operation: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Production from Paddock perforations 5056-5061' in this well has declined to 5 or 6 BOPD. We propose to squeeze cement these perms w/75 sx; drill out to 6300'; set CIBP @ 6250' and perforate Tubb gas zone from 6010-24, 6055-65 & 6082-6092' w/1 JSPF. Treat perms w/2500 gallons 15% HCl acid. Complete as single Tubb well through 2-3/8" tubing w/hookwall packer at approximately 5950'.

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

SIGNED A.D. Sutch TITLE Dist. Drlg. Supervisor DATE 2/1/71  
 APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE SEP 3 1971  
 CONDITIONS OF APPROVAL, IF ANY: