

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-97

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

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

WELL API NO.
30-025-34163

5. Indicate Type of Lease
STATE **FRE**

6. 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"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name
J. H. WILLIAMS

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.
2

2. Name of Operator
ARCO Permian

9. Pool name or Wildcat
SKAGGS (DRINKARD) & MONUMENT (TURB)

3. Address of Operator
P.O. Box 1610 Midland, TX 79702

4. Well Location
Unit Letter **P** : **470** Feet From The **SOUTH** Line and **990** Feet From The **EAST** Line

Section **34** Township **19S** Range **37E** NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3569'GR

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 checked="" type="checkbox"/> | |
| OTHER: _____ <input type="checkbox"/> | | OTHER: _____ <input 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.

**11-23-97 Set 4-1/2" casing @7000' with 265 sx Type H cement. WOC 11 hrs.
Calculated TOC @3565'**

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

SIGNATURE *Laurie Cherry* TITLE REGULATORY COMPLIANCE DATE 12-3-97
TYPE OR PRINT NAME LAURIE CHERRY TELEPHONE NO. 915-688-5532

(This space for State Use)
**ORIGINAL SIGNED BY
GARY WINK
FIELD REP. II**

APPROVED BY _____ TITLE _____ DATE **DEC 09 1997**
CONDITIONS OF APPROVAL, IF ANY: