

Submit 3 Copies
to Appropriate
District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2008

WELL API NO. 30-025-20081
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name South Justis Unit "B"
8. Well No. 19
9. Pool Name or Wildcat Justis Blbry-Tubb-Dkrd

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR 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	2. Name of Operator ARCO OIL and GAS COMPANY	8. Well No. 19
3. Address of Operator P.O. Box 1610, Midland, Texas 79702	4. Well Location Unit Letter <u>C</u> : <u>660</u> Feet From The <u>North</u> Line and <u>2310</u> Feet from The <u>West</u> Line Section <u>23</u> Township <u>25S</u> Range <u>37E</u> NMPM <u>Lea</u> County	9. Pool Name or Wildcat Justis Blbry-Tubb-Dkrd
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3090.8 GR		

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	
(Other) _____ <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
(Other) _____ <input type="checkbox"/>	

12. Describe Proposed or completed Operation (Clearly state all pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

9-01-93. POH w/CA. Tag fill @ 5420. CO to TOF @ 5427. Mill over & CO junk f/5427-5439. CO to 5515. Add perfs f/5308-5500. Press test csg to 500#. Acidize perfs 5167-5500 w/9000 gals. Frac w/56,000 gals & 190,000 sd. Swab & CO frac sd. RIH w/CA: 2-3/8 tbg, rods & pump to 5490. RDPD 9-23-93.

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

SIGNATURE Johnny Shields TITLE Drilling Team Leader DATE 10-12-93
TYPE OR PRINT NAME Johnny Shields TELEPHONE 915 688-5674

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE OCT 15 1993

CONDITIONS FOR APPROVAL, IF ANY: