

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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 87504-2088

WELL API NO. 30-025-26882
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 FREDERICK H. CURRY WN
8. Well No. 4
9. Pool name or Wildcat LANGLIE MATTIX 7 RVS QN GB
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3355.4 GR

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. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
ARCO Oil and Gas Company

3. Address of Operator
P.O. Box 1710, Hobbs, New Mexico 88240

4. Well Location
Unit Letter **K** : **1980** Feet From The **SOUTH** Line and **1980** Feet From The **WEST** Line
Section **1** Township **24 S** Range **36 E** **NMPM LEA** County

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING
 OTHER:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
 CASING TEST AND CEMENT JOB
 OTHER: **ABANDON LANGLIE MATTIX**

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.

SET CIBP @ 3445', LOAD CSG, AND TEST TO 500# (CHART ATTACHED).

PREPARE TO RECOMPLETE IN JALMAT.

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

SIGNATURE *James Cogburn* TITLE OPERATION COORDINATOR DATE 11/15/93
 TYPE OR PRINT NAME JAMES COGBURN TELEPHONE NO. 391-1600

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE NOV 23 1993

CONDITIONS OF APPROVAL, IF ANY:

Handwritten notes:
2A Langlie Mattix
SANTA FE, N.M.