

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department  
**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

API NO. (assigned by OCD on New Wells) <b>30-025-12341</b>	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. <b>27197</b>	
7. Lease Name or Unit Agreement Name <b>W. Dollarhide Devonian Unit</b>	
8. Well No. <b>102</b>	
9. Pool name or Wildcat <b>Dollarhide Devonian</b>	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) <b>3188' GR</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. Type of Well:  
OIL WELL  GAS WELL  OTHER

2. Name of Operator  
**Arch Petroleum, Inc.**

3. Address of Operator  
**10 Desta Dr., Suite 420E, Midland, TX 79705**

4. Well Location  
Unit Letter **E** : **1980** Feet From The **north** Line and **660** Feet From The **west** Line  
Section **33** Township **24S** Range **38E** NMPM **Lea** County

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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 ABANDON. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CMT JOB <input 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.

**Clean out, acidize, & downsize subpump**  
8/27/95 Cleaned out fill in open hole f/7963'-7986'. PBTD=7986'. TD=7990'. Acidized w/5,000 gal 15% HCL.  
Install tbq & subpump equipment. Return to production. 8/31/95

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

SIGNATURE *Bobbie Brooks* TITLE Production Analyst DATE: 9/15/95

TYPE OR PRINT NAME Bobbie Brooks TELEPHONE NO. (915)685-1961

APPROVED BY ORIGINAL TITLE \_\_\_\_\_ DATE SEP 19 1995

CONDITIONS OF APPROVAL, IF ANY:

41

82 11 1970

RECEIVED  
SEP 10 1970  
OLD BOARD  
OFFICE