ENERGY AND MINERALS DEPARTMENT	
DISTRIBUTION OIL CONSERVATION DIVISIC	Form C-103
	Revised 10-1-78
SANTA FE, NEW MEXICO 87501	5a. Indicate Type of Lease
U.S.O.S.  LAND OFFICE  O. C. D.	State X Foo
OPERATOR ARTESIA, OFFICE	5. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DECEPEN OF PLUG BACK TO A DIFFERENT RESI	ERVOIR.
	7. Unit Agreement Name
WELL X WELL OTHER-	8. Form or Lease Name
2. Name of Operator  ARCO Oil and Gas Company - Div. of Atlantic Richfield Company	
1. Address of Operator	9. Well No.
P. O. Box 1710, Hobbs, New Mexico 88240	40
4. Location of Well	10. Field and Pool, or Wildcat Empire Abo
UNIT LETTER P 660 FEET FROM THE SOUTH LINE AND 660	FEET FROM THE THE TOO
THE East LINE, SECTION 26 TOWNSHIP 17S RANGE 28E	
THE EAST LINE, SECTION 20 TOWNSHIP RANGE	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3665' GL	Eddy
16. Check Appropriate Box To Indicate Nature of Notice, F	Report or Other Data
NOTICE OF INTENTION TO:	UBSEQUENT REPORT OF:
NOTICE OF INTENTION TO.	ALTERING CASING
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  TEMPORARILY ABANDON  TEMPORARILY ABANDON  TEMPORARILY ABANDON	ALTERING CASING PLUG AND ABANDONMENT
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING  CHANGE PLANS  CASING TEST AND CEME	ALTERING CASING  PLUG AND ABANDONMENT  NT JQB
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING  THE CASING  PULL OR ALTER CASING  PULL OR ALTER CASING  THE CASING TEST AND CEME  OTHER	ALTERING CASING  PLUG AND ABANDONMENT  NT JQB
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING  OTHER	ALTERING CASING PLUG AND ABANDONMENT NT JQB Shut In X
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING  OTHER  17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent	ALTERING CASING PLUG AND ABANDONMENT NT JQB Shut In X
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18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

TITLE Area Prod Supt.

Original Signed By

Les A. Clements

TITLE

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

Supervisor District | 1