

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.  
30-015-215-3900

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
647

JAN 4 1994

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 Gas Injection Well

7. Lease Name or Unit Agreement Name

Empire Abo Unit

2. Name of Operator  
ARCO Oil and Gas Company

8. Well No.  
H-261

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

9. Pool name or Wildcat  
Empire Abo Unit

4. Well Location  
Unit Letter N : 1400 Feet From The West Line and 150 Feet From The South Line  
Section 32 Township 17S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3668.6' GR

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: MIT Casing Test ☒

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.

11/18/93: Load csg tbg annulus. Press up to 610#, held for 20". Test chart attached.

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

SIGNATURE Kevin D. Murrish / Jdc TITLE Operations Coordinator DATE 12/30/93

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY  
JOHNNY ROBINSON

APPROVED BY OIL & GAS INSPECTOR  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_ DATE JAN 14 1994

