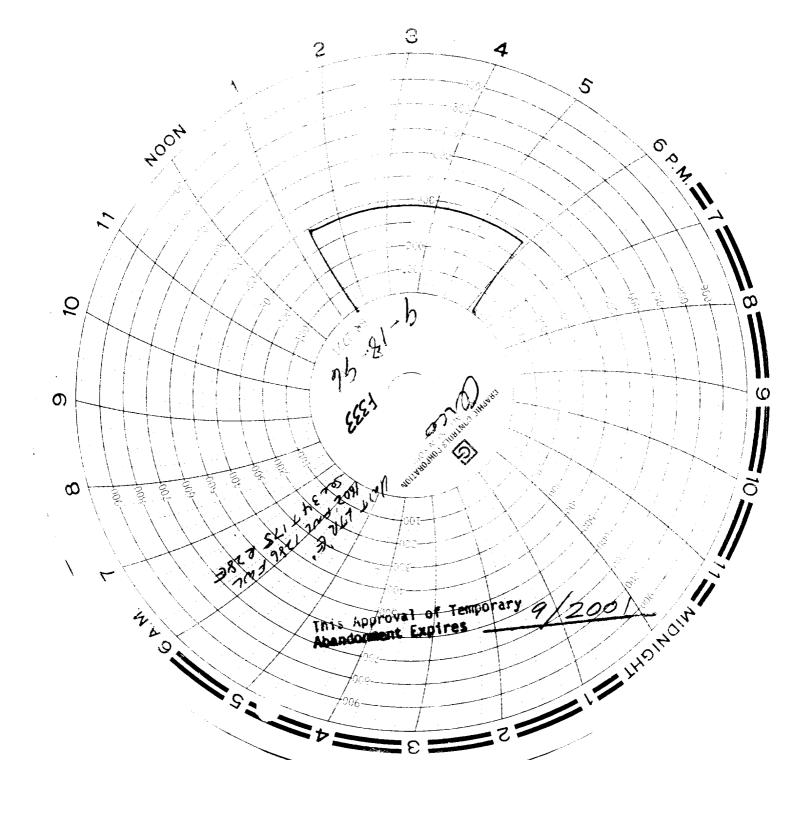
Submit 3 Copies to Appropriate
District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office			
DISTRICT I P.O. Box 1980, Hobbs NM 88240	OIL CONSERVAT		WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30-015-22226 5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	0		6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PR DIFFERENT RESE	TICES AND REPORTS ON VOPOSALS TO DRILL OR TO DEE	WELLS PEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name EMPIRE ABO UNIT "F"
1. Type of Weil: OIL GAS WELL X WELL	OTHER :	OCT 2 8 1995	
2. Name of Operator ARCO Permian			8. Well No. 333
3. Address of Operator P.O. Box 1710, Hobbs, New Me	xico 88240	CON. DIV.	9. Pool name or Wildcat EMPIRE ABO
4. Well Location Unit Letter E : 1286	Feet From The_W	Line and 1602	Feet From The N Line
Section 34	Township 17S 10. Elevation (Show v	Range 28E whether DF, RKB, RT, GR, etc.,	NMPM EDDY County
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	NG OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB
OTHER:		OTHER: TEMPORA	RILY ABANDONED X
 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. TD: 6319' PERFS: 6170-6190' CIBP @ 6146.85' 09/18/96 CSG MIT WITNESSED BY KEN LIVINGSTON AND RAY SMITH FOR NMOCD 			
MIT EVERY FIVE YEARS IN ACCORDANCE TO NMOCD RULE 203			
This Approval of Temporary 4/2001			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE KILLIE W. MILANISH TITLE Admin ast. DATE 10/25/96			
TYPE OR PRINT NAME KELLIE D.	MURRISH		TELEPHONE NO. 391-1649
(This space for State Use)	· ·	- •	
1.1	1	()	



GER OF STATE OF THE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OF THE OFFICE OFF

The state of the s