

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.

015-30187

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name

WASHINGTON "33" STATE

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

ARCO Permian

8. Well No.

2

3. Address of Operator

P.O. Box 1610 Midland, TX 79702

9. Pool name or Wildcat

ARTESIA QUEEN GRBG SA

4. Well Location

Unit Letter A : 990 Feet From The NORTH Line and 930 Feet From The EAST Line

Section 33 Township 17S Range 28E NMPM EDDY County

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

3677'

11.

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 DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: SPUD AND SET CASING ☒

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.

10/21/98 MIRU SPUD 12-1/4 HOLE . DRILLED FROM 0-425'.

10/22/98 SET 8-5/8" 32# CASING @ 425' WITH 275 SKS CLASS C CMT. WOC 19 HRS.
CIRC. 33 SKS TO SURFACE.

10/29/98 SET 5-1/8" 15.5 J-55 CASING @ 4150' WITH 350 SX LEAD TYPE C CMT AND FOLLOW
WITH 560 SX CLASS C CMT. CIRC. 75 SX TO SURFACE.



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

SIGNATURE Laurie Cherry TITLE REGULATORY COMPLIANCE DATE 11/1/98

TYPE OR PRINT NAME LAURIE CHERRY

TELEPHONE NO. 915-688-5532

(This space for State Use)

**ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR**

APPROVED BY BWG TITLE 11-18-98

CONDITIONS OF APPROVAL, IF ANY: