

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

CIST
Op

DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

DISTRICT 2
P.O. Drawer 00, Artesia, NM 88210

DISTRICT 3
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL APNO
30-015-04418

5. Indicate Type of Lease

Federal

6. State Oil & Gas Lease No
LC-060529

7. Lease Name or Unit Agreement Name

8. Well No.
Beeson "F" Federal No. 7

9. Pool name or Wildcat
Loco Hills QN-GB-SA

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 ☐ GAS ☐ WELL ☐

2. Name
AROC (TEXAS) INC
PO BOX 702373

3. Address
TULSA OK 74170-2373
505/885-5433

4. Well Location
Unit Letter A 990' Feet From The North Line and 330' Feet From The East Line
Section 31 Township 17S Range 30E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3585'

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER: ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Casing Integrity Test ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

10/06/00 RIH w/4 1/2" 10.5# plastic coated tension pkr. 81 jts new 2 3/8" coated (TK-70) injection tbg. Circulated pkr fluid and set pkr @ 2493'. Tested annulus to 370 psi and held for 30 min. Held good.

Original chart attached.

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

SIGNATURE Thallia Marshall TITLE

DATE 10/13/00

TYPE OR PRINT NAME Thallia Marshall

TELEPHONE NO. 505-885-5433

(This space for State Use)

APPROVED BY Bernie J. J. TITLE

DATE 2-16-01

CONDITIONS OF APPROVAL IF ANY: