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Submit 3 Copies to Appropriate	State of New Mexico Energy, Minerals and Natural Resources Department	Form C-103 45 Revised 1-1-89		
District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088	WELL API NO.		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease STATE X FEE		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6 B	6. State Oil & Gas Lease No. 647		
SUNDRY NOT	CES AND REPORTS ON WELLSCEIVE			
SUNDRY NOTICES AND REPORTS ON WELLSCHVER (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name		
1. Type of Well: OL WELL X WELL	OTHER	RESLER-YATES-STATE		
2. Name of Operator Arch Petroleum Inc.	ARTESIA, UMACE	8. Well No. 317		
3. Address of Operator		9. Pool name or Wildcat		
Suite IIA, 777 Taylor	Street, Fort Worth, Texas 76102	QU-GB-SA Artesia		
4. Well Location Unit Letter <u>F</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line				
Suria 21	Township 18S Range 28E	NMPM Eddy County		
Section 21	Township 105 Range 20E 10. Elevation (Show whether DF, RKB, RT, GR, etc.)			
	3567GR			
11. Check	Appropriate Box to Indicate Nature of Notice, R	eport, or Other Data		
NOTICE OF INT	FENTION TO: SUE	SEQUENT REPORT OF:		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT				
	CASING TEST AND CEMENT JOB			
OTHER:	OTHER:	L_		
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	uions (Clearly state all pertinent details, and give pertinent dates, inclu	uting estimated date of starting any proposed		
Pull out of the hole i	with rods and tubing. Set bridge plu urg at 2074' to 2082'. Frac well wi on production	g in 4½ casing at 2300' th 20,000gal Gel and 42,550#		
•				
I hereby certify that the information above is tru	e and complete to the best of my knowledge and belief. V.P. Operati	ons DATE6-25-90		
SIGNATURE				

THE OR PRINT NAME	Jim B. Paschall	817 332 9209	TELEPHONE NO.
			JUN 2 8 1990
APPROVED BY	MIKE WILLIAMS SUPERVISOR, DISTRICT I	TITLE	DATE