

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Enr 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.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

647

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

Welch State

8. Well No.

State No. 7

9. Pool name or Wildcat

Artesia Q-GR-SA

1. Type of Well:

OIL

WELL ☒

GAS

WELL ☐

OTHER ☐

2. Name of Operator

Aceco Petroleum

3. Address of Operator

2106 Richey, Artesia, NM 88210

4. Well Location

Unit Letter K : 1330 Feet From The South Line and 1330 Feet From The West Line

Section 17 Township 18 South Range 28 East NMPM Eddy County

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

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: Verifying Production ☒

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.

We are enclosing documents on the captioned Welch State No. 7 well.

It was purchased by Aceco Petroleum from Collier & Collier, effective May 1, 1986.

The documents enclosed are Change of Operator to Aceco Petroleum dated May 12, 1986 and Supplement to the Oil Proration Schedule dated March 25, 1977, to Collier.

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

SIGNATURE Harold D. Parrish TITLE Partner DATE 1-5-93

TYPE OR PRINT NAME HAROLD D. PARRISH TELEPHONE NO.

(This space for State Use)

APPROVED BY Randy TITLE Secretary DATE 1-5-93

CONDITIONS OF APPROVAL, IF ANY: