

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 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

SEP 11 1989

WELL API NO. 30-015-26155
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. K-6852
7. Lease Name or Unit Agreement Name State 2
8. Well No. 3
9. Pool name or Wildcat Shugart Y7RQG
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3451.6 GR

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 WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator ARCO OIL AND GAS COMPANY
3. Address of Operator P. O. Box 1610, Midland, Texas 79702
4. Well Location Unit Letter D : 575 Feet From The North Line and 660 Feet From The West Line Section 2 Township 19S Range 30E NMPM Eddy County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: Location change <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

Propose to move location 15 feet North. Revised plat attached.

Post ID-1
9-15-89
Armed. Loc

I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE <u>Ken W. Gosnell</u>	TITLE <u>Engr. Tech.</u>	DATE <u>9-8-89</u>
TYPE OR PRINT NAME <u>Ken W. Gosnell</u>	<u>915/688-5672</u>	TELEPHONE NO.

(This space for State Use)	ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II	DATE <u>SEP 12 1989</u>
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

RECEIVED

OIL CONSERVATION DIVISION

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

SEP 11 '89

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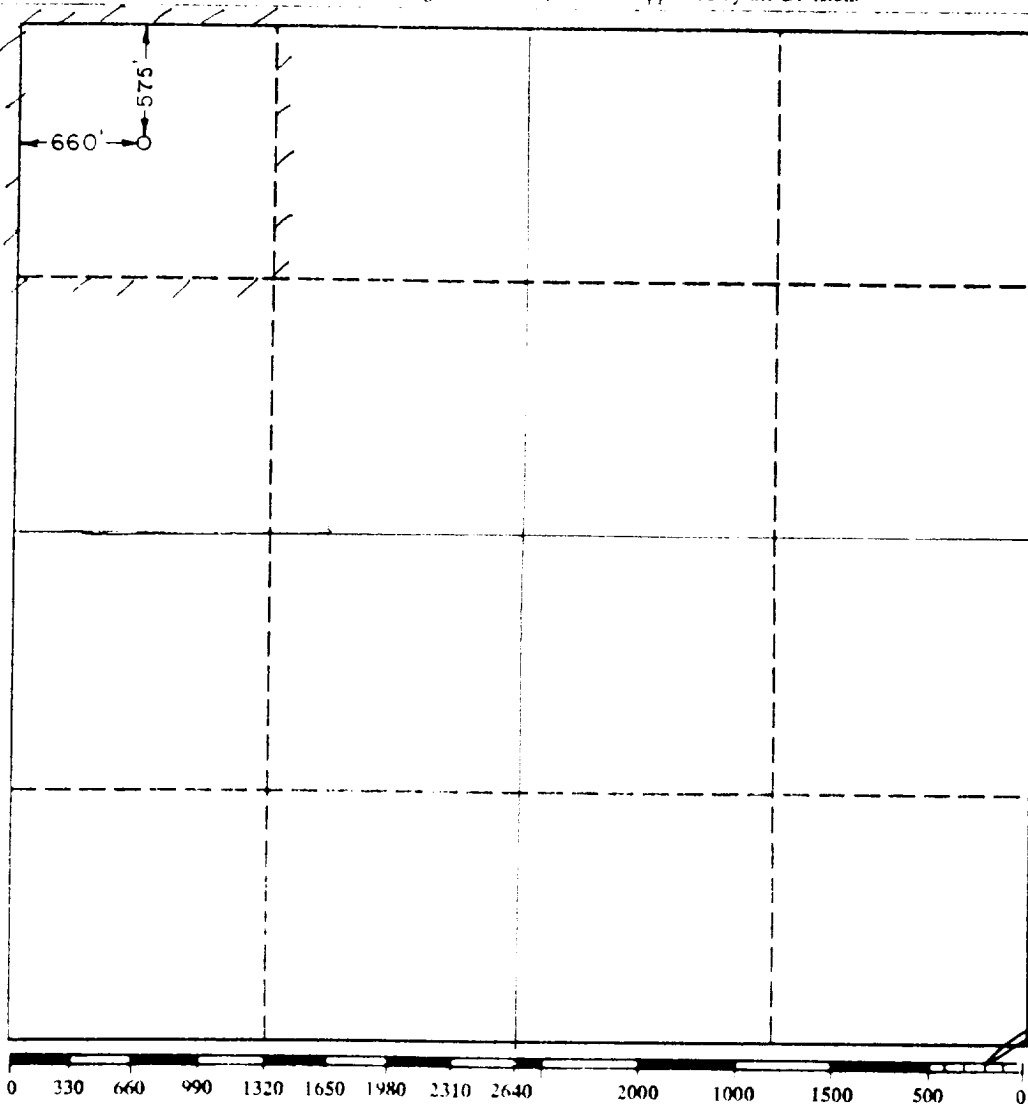
WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

O. C. D.
ARTESIA, OFFICE

Operator			Lease			Well No.		
ARCO Oil & Gas Co.						State 2		
Unit Letter	Section	Township	Range	County				
D	2	19 South	30 East	Eddy				
Actual Footage Location of Well:					NMPM			
575' feet from the north line and 660 feet from the west line								
Ground level Elev. 3451.6'					Producing Formation Green			
					Pool Shugart Y-SR-QG			
					Dedicated Acreage: Acres			

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?
Yes ☐ No ☐ If answer is "yes" type of consolidation
If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)
No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature Ken W. Gosnell
Printed Name Ken W. Gosnell
Position Engr. Tech.
Company ARCO Oil & Gas Co.
Date 9-8-89

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed July 12, 1989
Signature & Seal of Professional Surveyor [Signature]

Certificate No. JOHN W. WEST 676
RONALD WEIDSON 7239
JOHN W. WEST