

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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5a. Indicate Type of Lease
State ☐ Federal ☐
5. State Oil & Gas Lease No.

APR - 9 1979

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. Name of Operator ARCO Oil and Gas Company Division of Atlantic Richfield Company 3. Address of Operator P. O. Box 1710, Hobbs, NM 88240 4. Location of Well UNIT LETTER E 1650 FEET FROM THE North LINE AND 330 FEET FROM THE West LINE, SECTION 20 TOWNSHIP 17 S RANGE 31E NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 3626.80' DF	5a. Indicate Type of Lease State <input type="checkbox"/> Federal <input type="checkbox"/> 5. State Oil & Gas Lease No. 7. Unit Agreement Name 8. Farm or Lease Name Turner "B" 9. Well No. 42 10. Field and Pool or Wildcat Grayburg Jackson QGSA 12. County Eddy
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16. 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Install 2" Vent line to Surf

17. 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.

On 3/29/79 piped 2" vent line to surface between csg for pressure check in accordance with Oil Conservation Division casing leak survey.

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

SIGNED [Signature] TITLE Sr. Dist. Prod. Supvr. DATE 4/3/79

APPROVED BY BW Weaver TITLE OIL AND GAS INSPECTOR DATE MAY - 9 1979

CONDITIONS OF APPROVAL, IF ANY: