

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
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-36647
Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name J. R. Holt NCT A
Well No. 6
Pool name or Wildcat Fowler Devonian

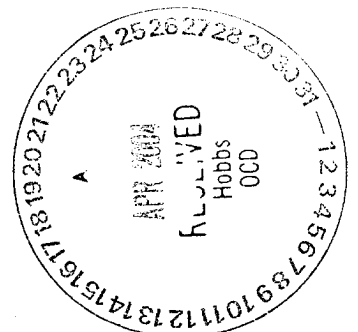
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
Name of Operator Arch Petroleum Inc.	
Address of Operator P. O. Box 10340, Midland, TX 79702-7340	
Well Location Unit Letter G : 2530 Feet From The North Line and 1980 Feet From The East Line Section 16 Township 24S Range 37E NMPM Lea County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3251'	

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: <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
	OTHER: Plug & skid rig <input checked="" type="checkbox"/>

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.

Set 700 sk CI "C" Neat plug @ top of fish @ 400'. RIH & tag cmt @ 150'. Set 200 sks CI "C" Neat plug & circ 60 sks to pit. RD. Preparing to skid 25' to the west.

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.



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

SIGNATURE <u>Cathy Wright</u>	TITLE <u>Sr. Operation Tech</u>	DATE <u>04/15/04</u>
TYPE OR PRINT NAME <u>Cathy Wright</u>	<u>432-685-8100</u>	TELEPHONE NO.

(This space for State Use)

APPROVED BY Harry W. Wink OC FIELD REPRESENTATIVE II/STAFF MANAGER
TITLE DATE
CONDITIONS OF APPROVAL, IF ANY