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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
OG 1195	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Atlantic Richfield Company		8. Farm or Lease Name State BF
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240		9. Well No. 5
4. Location of Well UNIT LETTER <u>D</u> , <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM THE <u>West</u> LINE, SECTION <u>3</u> TOWNSHIP <u>8S</u> RANGE <u>33E</u> NMPM.		10. Field and Pool, or Wildcat Chaveroo-San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4415' DF		12. County Chaves

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Shut in. Temporarily Abandoned</u> <input checked="" type="checkbox"/>

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.

The above well was shut in&temporarily abandoned November 10, 1966. The well was shut in and abandoned because it was uneconomical to produce. There are no recompletion possibilities for this well. The well is to be P&A in accordance w/OCC approval dated June 21, 1974. Work to commence no later than 1st quarter 1975.

Expired
10/1/75

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

SIGNED [Signature] TITLE Dist. Prod. & Drlg. Supt. DATE October 31, 1974

Orig. Signed by
Joe D. Ramey
[Signature]

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:



LTR



Job separation sheet

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PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

Present TD 4500', PBD 4412'. Well was TA on 11/10/66.
8-5/8" OD csg @ 376' cmt'd w/255 sx. Cmt circ to surface.
4 1/2" OD csg @ 4499' cmt'd w/300 sx. TOC behind csg @ 3211'.
Present perforations 4225-4390'.
Propose to P&A as follows:
Set 20 sk cmt plug 4171-4390'.
Cut 4 1/2" csg @ free point & pull.
Set 40 sk cmt plug across 4 1/2" csg stub.
Set 50 sk cmt plug across 8-5/8" csg shoe 300-447'.
Set 10 sk cmt plug @ surface. Heavy mud-laden material to be placed between plugs.
Install regulation marker, level & clean location. Your office to be notified when location is ready for final inspection.

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

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

SIGNED H. J. Bernard TITLE Dist. Drlg. Supv. DATE 6/18/74

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: