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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. B-10640

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 type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Plug & Abandon	7. Unit Agreement Name
2. Name of Operator Atlantic Richfield Company	8. Farm or Lease Name Ramco WN State
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240	9. Well No. 1
4. Location of Well UNIT LETTER M , 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 16S RANGE 35E NMPM.	10. Field and Pool, or Wildcat Undesignated
15. Elevation (Show whether DF, RT, GR, etc.) Unknown	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☒

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 6/1/75 rigged up & found 8-5/8" OD csg free point @ 750'. Cut 8-5/8" OD csg from free point @ 750' & pulled. WIH w/2-3/8" tbg OE to 820'. Spotted 50 sx Cl C cmt w/4% gel 820-640'. Pld up to 320'. Spotted 50 sx Cl C cmt w/4% gel 320-212' across 13-3/8" csg shoe. Spot 10 sx cmt @ surface. Installed regulation dry hole marker. Cleaned & levelled location. Plugged and abandoned eff 6/2/75. Your office to be notified when location is ready for final inspection.

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

SIGNED [Signature] TITLE Dist. Drlg. Supv. DATE 6/5/75

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: