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LAND OFFICE	
OPERATOR	

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 type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REPERFORATE OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT TO DRILL (FORM C-101) FOR SUCH PROPOSALS.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
Atlantic Richfield Company

3. Address of Operator
P. O. Box 1710, Hobbs, New Mexico 88240

4. Location of Well
UNIT LETTER J 1980 FEET FROM THE South LINE AND 2310 FEET FROM
THE East LINE, SECTION 36 TOWNSHIP 14S RANGE 37E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3800' GR

7. Unit Agreement Name

8. Farm or Lease Name
W. T. Mann "B"

9. Well No.
1 4

10. Field and Pool, or Wildcat
Denton Devonian

12. County
Lea

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"/> Shut in

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.

This well was shut in on August 12, 1976 due to a possible csg leak. The well is presently being evaluated for remedial work or plug and abandoning. Average Production for August was approx. 9 BO and 400 BWPD.

Expire 9/1/77

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

SIGNED H. L. Fourn TITLE Sr. Dist. Prod. Supervisor DATE August 18, 1976

APPROVED BY [Signature] TITLE DATE AUG 20 1976

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 1 - 1976

C. L. CONSERVATION COMM.
HOBBS, N. M.