

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Lease ☐

5. State Oil & Gas Lease No.
B-4109

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

1. Name of Operator
ARROWHEAD OIL CORPORATION

2. Address of Operator
P.O. BOX 548, ARTESIA, NM 88210

3. Location of Well
UNIT LETTER **C** **330'** FEET FROM THE **North** LINE AND **2309.3** FEET FROM
THE **West** LINE, SECTION **32** TOWNSHIP **17S** RANGE **32E** NE1PM.

7. Unit Agreement Name

8. Form of Lease Name
WALLINGFORD

9. Well No.
2

10. Field and Pool, if Vilitat
MALJAMAR

12. County
LEA

11. Elevation (Show whether DF, RF, GR, etc.)
3918 KB

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	
		OTHER ☐	

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.

9-8-82

Perforations: 3866'-3874' 8 shots
3898'-3904' 8 shots
3948'-3952' 4 shots

Frac Grayburg w/1000 bbls. of gel water and 15000# 20/40 sand, & 12500# of 10/20 sand.

PLEASE INCREASE LEASE ALLOWABLE 18 BBLS. PER DAY, A TOTAL OF 80 BBLS PER DAY.

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

SIGNED *Shirley Lopez* TITLE PRODUCTION CLERK DATE 9-14-82

ORIGINAL SIGNED BY JERRY SEXTON DATE SEP 27 1982

APPROVED BY DISTRICT 1 SUPR. DATE

CONDITIONS OF APPROVAL, IF ANY: