

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-21624
5. Indicate Type of Lease	STATE ☒ FEE ☐
6. State Oil & Gas Lease No.	E-1582
7. Lease Name or Unit Agreement Name	Sinclair Vacuum SWDS
8. Well No.	1
9. Pool name or Wildcat	Vacuum
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3915 GR

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. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER ☒ Disposal	2. Name of Operator ARCO OIL AND GAS COMPANY
3. Address of Operator P. O. Box 1610, Midland, Texas 79702	4. Well Location Unit Letter 0 : 735 Feet From The South Line and 2055 Feet From The East Line Section 16 Township 18S Range 35E NMPM Lea County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: ☐

12. 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.

Propose to P & A as follows:

Plug	Interval	Cmt	Remarks
1	3950-5000	150 sx	Pmp down inj tbg & displace to packer. WOC.
2	3900	-----	Set CIBP above pkr. Displace hole w/GBW.
3	3800-3900	35 sx	Spot.
4	2550-2650	35 sx	Spot. BOS at 2600.
5	1570-1670	35 sx	Spot. TOS at 1620.
6	0-450	150 sx	Spot.

Install dry hole marker.

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

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

SIGNATURE Ken W. Gosnell TITLE Engr. Tech. DATE 7-25-89
TYPE OR PRINT NAME Ken W. Gosnell TELEPHONE NO. 915/688-5672

(This space for State Use)

Eddie W. Seay
Oil & Gas Inspector

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JUL 31 1989