

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.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B - 2317

7. Lease Name or Unit Agreement Name

Hale State

8. Well No.

1

9. Pool name or Wildcat

Vacumm Grbg SA

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 ☐

Waterflood

OTHER Observation Well

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 A : 660 Feet From The North Line and 660 Feet From The East Line

Section 31 Township 17S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4082 GR

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

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.

8-10-89. RU PU. CO to 2700. Circ hole w/10# BW w/25# gel/bbl - 30 vis. P & A.

Plug	Interval	Cmt	Remarks
1	2600-2700	30 sx	Spot
2	1505-1665	30 sx	Spot
3	1600	--	5-1/2" CIBP
4	890-990	30 sx	Spot
5	0-60	10 sx	

Cut off WH. Weld on 1" valve & dry hole marker. P & A'd 8-11-89.

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 9-14-89

TYPE OR PRINT NAME Ken W. Gosnell 915/688-5672 TELEPHONE NO.

(This space for State Use)

Eddie W. Seay
Oil & Gas Inspector

OCT 16 1989

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: