ENERGY AND MINERALS DEPARTMENT			
KO. OF COPICE RECEIVED	L CONSERVATIO		
DISTRIBUTION	P. O. BOX 2088		Form C-103 -
SANTA FE			Revised 10-1-78
FILE	SANTA FE, NEW MEX	100 87501	
U.S.O.S.			5a. Indicate Type of Lease
LAND OFFICE			State X Fee
OPERATOR			5. State Oil & Gas Lease No.
and a second			B-2317
SUNDRY N (DO NOT USE THIS FORM FOR PROFOSA USE "APPLICATION F	OTICES AND REPORTS ON WELL IS TO DRILL AND TO UPPERED A DA PLUE BOLL TO A PERMIT	S DIFFERENT RESERVOIR.	
			7. Unit Agreement Name
2. Nume of Operator	8. Farm or Lease Name		
ARCO Oil and Gas Company ·	State Vacuum Unit		
3. Address of Operator	9. Well No.		
P. O. Box 1710, Hobbs, New	2		
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER A 990	FEET FROM THE North LINE	AND S30 FEET IFRO	Vacuum Grbg SA
THE East LINE, SECTION	31 TOWNSHIP 175 R	ANCE	
MANAN MANANANAN SA	12. County		
//////////////////////////////////////	Lea		
The Check Appr	opriate Box To Indicate Nature	of Notice Report of Or	het Data
NOTICE OF INTE		•	T REPORT OF:
4- m-mag			
PERFORM REMEDIAL WORK	. PLUG AND ABANDON REMED	IAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMME	NCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CABING	CHANGE PLANS CASING	TEST AND CEMENT JOB	
	отн	LR <u>Converte</u>	ed to Producer X
OT HER		No. May any constrained a constrained to a second	and a second
12 December 2 Completed Occurry	and Clearly state all sections details and		

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 1903.

On 9/22/87 the State Vacuum Unit #2 was converted from an injection well to a producer. Disconnected from injection line, layed flowline from well to header at central battery. This is in compliance with our agreement with Mr. Jerry Sexton of the NMOCD as a result of oil being produced off the Hale State #1. On 9/28/87 well produced 0 BO, 5 BW & 0 MCFG.

A C-116 will be filed if an allowable is needed.

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	18. I hereby certify that the information above is true and comp EIGNED	 t of my knowledge and belief. Area Prod Supt.	DATE 9/29/	87
	ORIGINAL SIGNED BY JERRY SEXPON DISTRICT I SUPERVISOR	 	DCT 1	1987



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