

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.<br>300250216900  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br>B-143   |
| 7. Lease Name or Unit Agreement Name<br><br>STATE VACUUM UNIT                                       |
| 8. Well No.<br>10   |
| 9. Pool name or Wildcat<br>VACUUM GRBG-SA   |

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|--|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"<br>(FORM C-101) FOR SUCH PROPOSALS.)           |  |
| 1. Type of Well:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>  |  |
| 2. Name of Operator<br>ARCO OIL AND GAS COMPANY  |  |
| 3. Address of Operator<br>BOX 1710, HOBBS, NEW MEXICO 88240  |  |
| 4. Well Location<br>Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>EAST</u> Line<br>Section <u>32</u> Township <u>17S</u> Range <u>34E</u> NMPM LEA County <u></u> |  |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>4076 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: SHUT IN EXTENSION ☒

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.

THIS WELL WAS SI 2/3/89 PENDING EVALUATION.

REQUEST TO HOLD WELLBORE FOR FUTURE USE.

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

SIGNATURE James D. Cogburn TITLE Administrative Supervisor DATE 4/24/90  
TYPE OR PRINT NAME James D. Cogburn TELEPHONE NO. 392-3551

(This space for State Use)

Orig. signed by  
Paul Kautz  
Geologist

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

APR 26 1990

TA expires 4-1-91

RECEIVED

APR 25 1990

OCD  
HOBBS OFFICE