

RECEIVED	
DIVISION	
OFFICE	
TOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1399	

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.)

OIL WELL ☒ GAS WELL ☐ OTHER- ☐

Name of Operator

Atlantic Richfield Company

Address of Operator

P. O. Box 1710, Hobbs, New Mexico 88240

4. Location of Well

UNIT LETTER J 2310 FEET FROM THE East LINE AND 1650 FEET FROM
THE South LINE, SECTION 29 TOWNSHIP 17S RANGE 35E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name
State "M" DE

9. Well No.

2

10. Field and Pool, or Wildcat
Vacuum/Grbg SA

15. Elevation (Show whether DF, RT, GR, etc.)

3766' KB

12. County

Lea

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOB ☐

OTHER Clean Out & Frac ☒

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

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.

Work started on 8/1/73. CO formation sand from 4592-4615'. Treated OH 4003-4624' down 2-7/8" tubing w/51,000# 20/40 sand in 35,000 gal 9# brine. Treatment was in 4 stages separated by 500#, 700# & 300# stages of benzoic acid flakes. ATP 4000#. AIR 20 BPM. JC @ 4 PM 8/4/73. Ran 2-3/8" tubing & S.N. to 4583.27'. Swabbed well several days. Put well on rod pump. Load water not coming back. On test ending 11/1/73 pumped 2 BO & 1 BLW. Workover unsuccessful.

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

SIGNED P.D. Litcher

TITLE Dist. Drlg. Supv.

DATE 11/16/73

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: