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## 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
7. Unit Agreement Name
8. Farm or Lease Name State "M" DE
9. Well No. 3
10. Field and Pool, or Wildcat Vacuum-Grb/S.A.
12. County Lea

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
Name of Operator Atlantic Richfield Company
Address of Operator P. O. Box 1978, Roswell, New Mexico 88201
Location of Well UNIT LETTER <u>P</u> <u>330</u> FEET FROM THE <u>South</u> LINE AND <u>330</u> FEET FROM THE <u>East</u> LINE, SECTION <u>29</u> TOWNSHIP <u>17S</u> RANGE <u>35E</u> NMPM.

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

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>		COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER <u>Acid Job</u> <input checked="" type="checkbox"/>	

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.

Production from this well had dropped to 20 BOPD, no water. On 7-11-73 treated open hole 4174'-4578' w/500 gal 15% HCL acid. Production increased to 33 BOPD, no water.

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

SIGNED A. D. Bratcher TITLE Dist. Drlg. Supv. DATE 8-2-73

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: