

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-79

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
NM-752

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name
2. Name of Operator ARCO Oil and Gas Company	8. Farm or Lease Name Atlantic State 30
3. Address of Operator P.O. Box 1610, Midland, Texas 79702	9. Well No. 2
4. Location of well UNIT LETTER <u>A</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM THE <u>East</u> LINE, SECTION <u>30</u> TOWNSHIP <u>17S</u> RANGE <u>36E</u> NMPM.	10. Field and Pool, or Wildcat Double - A Abo, South
15. Elevation (Show whether DF, RT, GR, etc.) 3875.25 GR	12. County Lea

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 checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASINGS <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input 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.

Propose to P & A as follows:

Plug	Interval	Cmt	Remarks
1	4800-4938	25 sx	Set CIBP at 4938. Circ w/10 ppg GBW. Spot 25 sx
2	3400-3500	25 sx	Spot
3	1680-1780	25 sx	Spot
4	~0-20	10	Spot

THE OPERATOR MUST BE NOTIFIED 24
HOURS BEFORE THE BEGINNING OF
ANY WORK ON THE WELL.
THIS NOTICE IS NOT REQUIRED IF THE WELL
IS TO BE PLUGGED.

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

SIGNED Ken W. Gosnell TITLE Engr. Tech. 915-688-5672 DATE 6-29-88

APPROVED BY ORIGINAL - ORIGINAL - LARRY SEXTON TITLE REGIONAL SUPERVISOR DATE

CONDITIONS OF APPROVAL, IF ANY: