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
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 30-025-05983

5. Indicate Type of Lease STATE ☐ FEE XX

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name: BARBER GAS COM

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER

8. Well No. 2

2. Name of Operator: ARCO PERMIAN

9. Pool name or Wildcat: EUMONT YATES SRQ GAS

3. Address of Operator: PO BOX 1089 EUNICE nm 88231

4. Well Location
Unit Letter P : 990 Feet From The S Line and 660 Feet From The E Line
Section 7 Township 20S Range 37E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	XXX
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER:	☐			OTHER:			☐

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.

1. SET CIBP AT 2887' SPOT 50 SXS CEMENT ON CIBP SHUT DOWN WAIT ON CEMENT.
2. RIH TAG CEMENT AT 2710' (177' - 38.76 CF INSIDE) - (27.74 CF - 116' OUTSIDE) **SEE BACK
3. DISPLACED HOLE W/9.5# MUD.
4. SET CIBP AT 2300' CAPPED W/25 SXS CEMENT.
5. SET CIBP AT 2300' CAPPED W/25 SXS CEMENT PLUG FROM 997' - 848' TO COVER 13 3/8 CSG SHOE.
6. SPOTTED 25 SXS CEMENT PLUG FROM 60' TO SURFACE.
7. SPOT 10 SXS FROM 60' TO SURFACE. INSTALLED DRYHOLE MARKER.
8. CUT OFF WELL HEAD

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

SIGNATURE Ben Fisher TITLE FIELD SUPERVISORS DATE 12-20-99

TYPE OR PRINT NAME BEN FISHER TELEPHONE NO. (505) 392-6591

(This space for State Use)

APPROVED BY Gary W. Gill TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

GWW