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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 type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Atlantic Richfield Company	8. Farm or Lease Name J. L. Crump
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240	9. Well No. 2
4. Location of Well UNIT LETTER <u>B</u> , <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM THE <u>East</u> LINE, SECTION <u>15</u> TOWNSHIP <u>19S</u> RANGE <u>38E</u> N.M.P.M.	10. Field and Pool, or Wildcat Hobbs San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 3588' GR	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 JOBS ☐
OTHER Shut-in ☒

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.

The above well was shut-in during the month of July, 1967. This well was shut-in because it was uneconomical to produce. Plans are for this well to go into AMOCO's South Hobbs Unit as a producer. Unit should be effective by 01/01/75.

Expires 10/1/75

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

SIGNED [Signature] TITLE Dist. Prod. & Drlg. Supt. DATE October 31, 1974

Orig. Signed by
Joe D. Ranney
Dist. I, Supv.

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: