

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

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-08868

5. Indicate Type of Lease
STATE ☐ FEE ☒

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.)

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

2. Name of Operator
ARCO Permian

3. Address of Operator
P.O. Box 1710, Hobbs, New Mexico 88240

7. Lease Name or Unit Agreement Name
H.S. RECORD WN

8. Well No.
1

9. Pool name or Wildcat
JALMAT TANSIL YATES SRQ GAS

4. Well Location
Unit Letter P : 990 Feet From The SOUTH Line and 990 Feet From The EAST Line
Section 10 Township 22S Range 36E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3553' GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: FRAC AND STIMULATE ☐

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.

TD:3495', PBD: 3495', PERFS: OH

11/15/94
FIBERGLASS LINER WAS DRILLED OUT AND REPLACED W/5-1/2 STEEL PERFORATED LINER. STIMULATED
W/2,000 GALS 7-1/2% dad ACID, FRAC W/140 TONS co2 AND 176,120 LBS 12/20 BRADY, 43,900 LB 12/20
RESIN SAND.

Line - 3147-3495
and 10' x 10' x 10'

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

SIGNATURE

Kellie D. Murrish

TITLE ADMINISTRATIVE ASSISTANT

DATE 01/04/95

TYPE OR PRINT NAME KELLIE D. MURRISH

TELEPHONE NO. 391-1649

(This space for State Use)

ORIGINAL SIGNED BY
GARY WINK
FIELD REP. II

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

301 00 1095

RECEIVED

JAN 05 1985

U S S HOBBS
OFFICE