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OPERATOR	

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-1506
7. Unit Agreement Name
8. Form or Lease Name State 157 "D"
9. Well No. 4
10. Field and Pool, or Wildcat Arrowhead Grayburg
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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Atlantic Richfield Company
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240
4. Location of Well UNIT LETTER <u>I</u> , <u>2310</u> FEET FROM THE <u>South</u> LINE AND <u>990</u> FEET FROM THE <u>East</u> LINE, SECTION <u>12</u> TOWNSHIP <u>22S</u> RANGE <u>36E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3456' GL

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	Arrowhead Grbg zone
PULL OR ALTER CASING <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
OTHER <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <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 plug Arrowhead Grayburg open hole section 3570-3750' in the following manner:
1. Rig up, kill well & install BOP.
2. POH w/tbg & pkr. Make trip w/bit & scraper to 3560'.
3. Set cmt retr on tbg @ 3540'. Squeeze OH w/100 sx Class C cmt cont'g 4% gel. Test squeeze job.

Note: Procedure to recompleate this well to Eumont Queen Gas zone filed separately on Form C-101.

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

SIGNED [Signature] TITLE Dist. Drlg. Supv. DATE 11/13/75

APPROVED BY [Signature] TITLE DATE 11/17/75
CONDITIONS OF APPROVAL, IF ANY: