

NEW MEXICO OIL CONSERVATION COMMISSION

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|--|
| 5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No. 157 |

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 State 157 "D" |
| 3. Address of Operator P.O. Box 1710 - Hobbs, New Mexico 88240 | 9. Well No. 8 |
| 4. Location of Well UNIT LETTER M 330 FEET FROM THE South LINE AND 990 FEET FROM THE West LINE, SECTION 12 TOWNSHIP 22S RANGE 36E NMPM. | 10. Field and Pool, or Wildcat Arrowhead Grayburg |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3498' GR | 12. County Lea |

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 type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <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 Shut-in <input checked="" 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.

The above well was shut-in on May 1, 1968. The well was shut-in because it was uneconomical to produce. Plans are to stimulate the Arrowhead Grayburg during the 1st qtr of 1976.

Expires 10-1-76

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

| | | |
|---------------------------------|--|---------------------|
| SIGNED <u>DV Ricks</u> | TITLE <u>Dist. Prod. & Drlg. Supt.</u> | DATE <u>9-26-75</u> |
| APPROVED BY <u>John R. ...</u> | TITLE <u>...</u> | DATE <u>...</u> |
| CONDITIONS OF APPROVAL, IF ANY: | | |