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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☐ Fee ☒
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. Dual with gas OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator ARCO Oil & Gas Company Division of Atlantic Richfield Co.		8. Farm or Lease Name W.C. Roach
3. Address of Operator P.O. Box 1710, Hobbs, New Mexico 88240		9. Well No. 7
4. Location of Well UNIT LETTER <u>K</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>21</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> NMPM.		10. Field and Pool, or Wildcat Eumont Eunice Monument Grayb. SA
15. Elevation (Show whether DF, RT, GR, etc.) 3508.7 GR		12. County Lea

16. 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 <u>Shut-in</u> <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.

Grayburg San Andres zone was shut in on 1/21/84. Downhole pump stuck in tbq and production rate is uneconomical to return to production. Will continue to produce Eumont Gas zone of this dual well.

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

SIGNED D. L. Shackelford TITLE Engrg. Tech. Spec. DATE 7/25/84

ORIGINAL SIGNED BY DISTRICT ENGINEER DATE JUL 27 1984

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: