7	State of New Mexico Energy, erals and Natural Resources Department	Form C-103
ı	Submit 3 Copies	Revised 1-1-89
	District Office OIL CONSERVATION DIVISION	WELL API NO.
	DISTRICT I P.O Box 2088	30-025-04586
	P.O. Box 1980, Hobbs, NM 88240 Santa Fe. New Mexico 87504-2008	5. Indicate Type of Lease
	DISTRICT II P.O. Drawer DD, Artesia, NM \$\$210	STATE FEE X
	DISTRICT III	6. State Oil & Gas Lease No.
	1868 Rio Brazos Rd., Axtec, NM 87419	
	SUNDRY NOTICES AND REPORTS ON WELLS	
	(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
	DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)	Ernest C. Adkins
1.	Type of Well:	Efficit C. Adkins
	OIL GAS WELL X other	
2.	Name of Operator	8. Well No.
	ARCO OIL and GAS COMPANY	9
3.	Adress of Operator	9. Pool Name or Wildcat
	P.O. Box 1610, Midland, Texas 79702	Eumont Yts 7 Rvs Q
4.	Well Locastion	
	Unit Letter O: 730 Feet From The South Line and 1910	Feet from The <u>East</u> Line
	Section 9 Township 21S Range 36E NMPM	Lea County
	10. Elevation (Show whether DF, RKB, RT, GR, etc.)	Dod Oddiny
11	Check Appropriate Box To Indicate Nature of Notice, Report	or Other Data
		EQUENT REPORT OF:
P	ERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	X ALTERING CASING
	MPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
. (ULL OR ALTER CASING CASING TEST AND CEMENT J	OB
	(Other)	
•	Other) (Other) Describe Proposed or completed Operation(Clearly state allpertinent dates, including estimated date of starting	
12.	work) SEE RULE 1103.	any proposea
	4-12-92. RUPU. POH w/CA. Press test csg to 800#. Frac Queen Perfs 3448-3648 w/558 bb	ols, 114 tons CO2 carrying 160,000# 12/20
	sd. Flow back load. CO frac sd to 3674 PBD. Set Baker Lok-set at 3336 on 2-3/8	
	4-20-92. RDPU	
	4-26-92. In 24 hrs flowed 0 BO, 0 BW, 424 MCF, open ck, 50# TP.	
	4-20-92. Ill 24 ills flowed 0 BO, 0 BW, 424 McT, open ck, 50# 11.	
18	I hereby certify that the information above is true and complete to the best of my knowledge and belief	
		nator 5 – 4 – 9 2
	SIGNATURE Ken au Your Regulatory Coordin	nator 5-4-92
		(04E) 600 5070
_	TYPE OR PRINT NAME Ken W. Gosnell	TELEPHONE (915) 688-5672
	(This space for State Use) Tig. Signed have	
	(This space for State Use) Paul Kautz Coologie	DATE: ()
	型がある T - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	· 1987年 - 1987年

CONDITIONS FOR APPROVAL, IF ANY: