Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89 District Office **OIL CONSERVATION DIVISION** DISTRICT I WELL API NO. P.O. Box 1980, Hobbs NM 88240 P.O. Box 2088 30-025-04703 Santa Fe, New Mexico 87504-2088 DISTRICT II 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 FEE 🗌 STATE X DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 B-1581 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO 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.) STATE F DE 1. Type of Well: GAS WELL X WELL [OTHER 8. Well No. 2. Name of Operator 3 **ARCO** Permian 9. Pool name or Wildcat 3. Address of Operator **EUMONT YATES SRQ** P.O. Box 1710, Hobbs, New Mexico 88240 Well Location Line and 1815 Feet From The SOUTH Feet From TheWEST 1980 Unit Letter K Line Range 36E NMPM LEA County Township21S Section 19 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3643' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: **NOTICE OF INTENTION TO:** ALTERING CASING REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. **CHANGE PLANS** TEMPORARILY ABANDON CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: OTHER: 12. Describe Proposed or Completed Operation state all pertinent details, and give pertinent dates, including estimated date of starting any proposed SEE RULE 1103. work) TD: 3930' PBD: 3907 PERFS: 3269-3898' 07/14/94 ADDED 12 PERFORATIONS FROM 3269-3711' W/.40 HOLE SIZE STIMUALTED W/4000 GALS 7-1/2% HCL, FRAC W/176,620 BRADY SAND, 44,020 RESIN SAND, 137 TONS CO2.

| I hereby certify that the information above is true and complete to the best of my kn | nowledge and belief. | |
|---|--------------------------------|------------------------|
| SIGNATURE Relie D. Meurist | TITLE RECORDS CLERK II | DATE 08/08/94 |
| TYPE OR PRINT NAMEKELLIE D. MURRISH | | TELEPHONE NO. 391-1649 |
| (This space for State Use) | The part of the Carlo | DN |
| APPROVED BY | ORIGINAL SIGNED BY JERRY SEXTO | AUG 1 1 1994 |
| CONDITIONS OF APPROVAL, IF ANY: | | |