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LAND OFFICE	
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>NM-65</b>

## 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 <b>Atlantic Richfield Company</b>	8. Farm or Lease Name <b>State L Battery #4</b>
3. Address of Operator <b>P. O. Box 1710, Hobbs, New Mexico 88240</b>	9. Well No. <b>2</b>
4. Location of Well UNIT LETTER <b>F</b> , <b>1980</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>22</b> TOWNSHIP <b>21</b> RANGE <b>36</b> NMPM.	10. Field and Pool, or Wildcat <b>Manice - Grayburg</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>DF 3612</b>	12. County <b>Lea</b>

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

PERFORM REMEDIAL WORK	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<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 checked="" type="checkbox"/> <b>Acid wash well bore</b>

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.

**5-12-67**

**Treated open hole 3801-3900 with 1000 gals. 15% regular acid. Acid was pumped down casing with rods and tubing in place. Displaced acid with lease crude.**

**Production before job - 15 B.O.P.D. plus 65% water.**

**Production after job - 26 B.O.P.D. plus 70% water.**

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

SIGNED **D. E. Green** TITLE **District Prod. Supv.** DATE **5-19-67**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

OPERATOR	
LAND OFFICE	
U.S.G.S.	
FILE	
SANTA FE	
DISTRIBUTION	
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# NEW MEXICO OIL CONSERVATION COMMISSION

Form O-103  
Supersedes O-104  
O-103 and O-104  
Effective 1-1-59

1. Name of Operator <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		2. Address of Operator	
3. Location of Well		4. Field and Pool, or Wildcat	
5. Elevation (Show whether this is R.T. or G.P.)		6. County	
7. Line, Section, Township		8. Field and Pool, or Wildcat	
9. Name of Operator		10. Address of Operator	
11. Name of Operator		12. Address of Operator	
13. Name of Operator		14. Address of Operator	
15. Name of Operator		16. Address of Operator	
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95. Name of Operator		96. Address of Operator	
97. Name of Operator		98. Address of Operator	
99. Name of Operator		100. Address of Operator	

Check Appropriate Box To Indicate Nature of Notice Report or Other Data

NOTICE OF INTENTION TO:

<input type="checkbox"/> PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PLUG OR ALTER CASING <input type="checkbox"/> OTHER	<input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER	<input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCEMENT OF OPERATIONS <input type="checkbox"/> CASING TREATMENT OR REPAIR <input type="checkbox"/> OTHER	<input type="checkbox"/> ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> OTHER
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17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give precise dates, including estimated date of starting any proposed work) SEE RULE 1103.

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

Signed \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: