Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-08717 ✓

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. B-1511

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.)

7. Lease Name or Unit Agreement Name: STATE "F" DE

1. Type of Well: OIL WELL [XX] GAS WELL [ ] OTHER

2. Name of Operator: ARCO OIL & GAS COMPANY

8. Well No. 2

3. Address of Operator: P. O. BOX 1710 HOBBS, NEW MEXICO

9. Pool name or Wildcat: EUMONT YATES 7 RQ

4. Well Location
Unit Letter L : 1980 Feet From The South Line and 660 Feet From The WEST Line
Section 19 Township 21 S Range 36 E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3650' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[X]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			OTHER:			[ ]

12. 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.

TD 3950, PBD 3924, PERFS 3299-3824, OH 3850-3924

RUN CASED HOLE LOGS GR/TDT/CCL/CBL, SHOT 4 - .40" HOLES @ 3200' AND SQUEEZED 400 SX OF CLASS C CEMENT, TOC 2620' DRILL OUT TO PBD, PERFORATE EUMONT 3299 TO 3824 W/35 .41" SHOTS, ACIDIZE W/3500 GAL 7 1/2% HCL, FRAC W/ 270,000# OF 12/20 SAND AND 196 TONS CO2 WELL RETURNED TO PRODUCTION 03/03/93.

03/13/93 IN 24 HOURS PUMPED 10 BO, 8 BW, 226 MCF GOR 22,600

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

SIGNATURE [signature] TITLE OPERATIONS COORDINATOR DATE 03/25/93

TYPE OR PRINT NAME JAMES D. COGBURN TELEPHONE NO. 505-391-1621

(This space for State Use)

APPROVED BY Orig. Signed by Paul Kautz Geologist TITLE DATE MAR 26 1993

CONDITIONS OF APPROVAL, IF ANY: