

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.B.	
LAND OFFICE	
OPERATOR	

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator ARCO Oil and Gas Company - Div of Atlantic Richfield Company 3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240 4. Location of Well UNIT LETTER <u>A</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>20</u> TOWNSHIP <u>21S</u> RANGE <u>37E</u> N.M.P.M. 15. Elevation (Show whether DF, RT, GR, etc.) <u>3476' GR</u>	7. Unit Agreement Name 8. Farm or Lease Name <u>A. M. York</u> 9. Well No. <u>2</u> 10. Field and Pool, or Wildcat <u>Penrose Skelly</u> 12. County <u>Lea</u>
--	--

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 Well In</u> <input checked="" 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.

On test 4/03/87 well pumped 1 BO, 4 BW & 17 MCFG. Closed tubing and casing valves and shut well in effective April 21, 1987 pending evaluation. Final Report.

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

SIGNER Stewart Smith TITLE Area Prod. Supt. DATE 5/6/87

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE MAY 11 1987

CONDITIONS OF APPROVAL, IF ANY:

Expires 4-10-88

RECEIVED
MAY 6 1987
GCD
HOBBS OFFICE