Submit 3 Copies to Appropriate District Office	State of New Mexico E y, Minerals and Natural Resources Departmer		Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION 2040 Pacheco St.			WELL API NO.
DISTRICT II Santa Fe, NM 87505 P.O. Drawer DD, Artesia, NM 88210			30-025-34957 sIndicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE
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.)			7Lease Name or Unit Agreement Name
Type of Well: OIL GAS WELL WELL	OTHER		Stephens Estate
2Name of Operator Arch Petroleum Inc. 3Address of Operator	and the second se		sWell No. 5
P. O. Box 10340, Midland, TX 79	9702-7340	<u></u>	Pool name or Wildcat Wantz Abo
Unit Letter <u>K</u> 2310	Feet From The South	Line and 1650	Feel From The West
Section 24	Township 21	Range 37	
	¹⁰ Elevation (Show whether DF, 3421 GR		County
11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
SUBSEQUENT REPORT OF			
!	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPP	
OTHER:		CASING TEST AND CEMEN	
	s (Claarly state of an dia state	OTHER: Spud, Set Surf	ace, Inter & Prod Csg
¹² Describe Proposed or Completed Operations (<i>Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed</i>			
BOP's & test to 1000# ok.	See 110 001 11/02/00. Circ 300 sks	s to surface. WOC 25-1/2	to 538'. TD reached @ 1100 hrs 11/02/00. 12.8 prg followed by 150 sks "C" w/ 2% 2 hrs. Make cut-off. Weld on WH. NU
	Make cut off	Mold on MIL MUDDA	32# J-55 ST&C csg. Float shoe @ 3000'. + 1% CaCl2 @ 14.8 ppg. Plug down @ ''s & test to 1000# ok.
17# 1-55 1 T&C and D	Die to 7400'. TD reached @ 0415 h	re CST 11/10/00	"s & test to 1000# ok. d well w/ Baker Atlas. Ran 182 jts 5-1/2" g. Plug down @ 2145 hrs 11/20/00. Circ ug down @ 0445 hrs 11/21/00. Circ 15 sks
I hereby certify that the information above is true	e and complete to the best of my knowledge	and belief.	
SIGNATURE Cathy In	bel. TITLE	Operation Tech	DATE 01-08-00
TYPE OR PRINT NAME Cathy Tomberlin (This space for State Use)			TELEPHONE NO. 915-685-8100
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	teri Artes antise attes 	Una DATE

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