## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

MB. OF COPIED RECEIVED				
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
OPERATOR				

## OIL CONSERVATION DIVISION

DISTRIBUTION	P. O. BOX 2088		Form C-103	
SANTA FE	SANTA FE, NEW MEXICO 87501			Revised 10-1-78
FILE	]	·		5a. Indicate Type of Lease
U.S.G.S.	]		·	State Fee X
LAND OFFICE	}			
OPERATOR	}			5, State Oil & Gas Lease No.
				, , , , , , , , , , , , , , , , , , ,
SUNDR	Y NOTICES AND REF	PORTS ON	WELLS	
IND MAY USE THIS FORM FOR PRO	SPOSALS TO DRILL OR TO GEE!	PEN OR PLUG 8	ACK TO A DIFFERENT RESERVOIR. H PROPOSALS.)	
1.				7. Unit Agreement Name
OIL X WELL	OTHER-			
2. Name of Operator				8. Farm or Lease Name
	. Div of Atlan	tic Rich	field Company	Seven Rivers Queen Unit
ARCO Oil and Gas Company 3. Address of Operator	7 - DIV. OI ACIAN	CIC KICH	Tield Company	9. Well No.
	North on 99240			8
P. O. Box 1710, Hobbs, 1	New Mexico 88240			10. Field and Pool, or Wildcat
4. Location of Well				
UNIT LETTER H	1650 FEET FROM THE .	North	LINE AND 990 FEET FROM	Eunice 7Rivers On So.
THE East LINE, SECTI	on 27 Towns	22S	RANGE 36E NMPM.	
THE LINE, SECTI				
	15. Elevation (S	how whether	DF, RT, GR, etc.)	12. County
		3502' GI		Lea
16.				non Data
Check		indicate N	lature of Notice, Report or Oth	
NOTICE OF I	NTENTION TO:		SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND	ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PL	ANS	CASING TEST AND CEMENT JOB	
POLE OF METER CHOINE			OTHER	Shut In X
OTHER				
17 Describe Proposed or Completed Or	perations (Clearly state all	pertinent det	ails, and give pertinent dates, including	estimated date of starting any proposed
work) SEE RULE 1103.				•
0 //16/06 11 1	1 5 DA 00 DII C 2	MCEC		
On 4/16/86 well produce	a 5 BU, 88 BW & 3	MUFG.	Wall shut in offsetiv	o 5/02/86 pending
Chemical treated well,	shut in tubing an	id casing	g. Well shut in effectiv	e 3/02/00 bending
evaluation. Final Repo	rt,			
	• .			
		•	•	
•		•		
			STARBORNE AND ALLE	-1, 107
			DAMES LYP 5	1 Of Survey
			17	,
18. I hereby certify that the information	a above is true and complet	e to the best	of my knowledge and belief.	
10.1 nereny certify mer the manmatter	0 1			
<del>//</del> ~	X -+/		Aman Done 3 Comb	DATE 5/21/86
SIGHED Nevey	Emus	TITLE :	Area Prod. Supt.	DATE
		<del> </del>		·
Eddie W C	ASTENE			MATE WILL WIND
Eddie W. Sa	ea y	TITLE		_ DATE
THE SECTION ASSESSED.	)@e***			

MAN 3 1986