

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department  
**OIL CONSERVATION DIVISION**  
P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		API NO. (assigned by OCD on New Wells) <b>30-025-09210</b>	
1. Type of Well: OIL <input type="checkbox"/> GAS <input type="checkbox"/> WELL <input type="checkbox"/> WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
2. Name of Operator <b>Arch Petroleum, Inc.</b>		6. State Oil & Gas Lease No. <b>014904</b>	
3. Address of Operator <b>10 Desta Drive, Suite 420 E, Midland, TX 79705</b>		7. Lease Name or Unit Agreement Name <b>J.F. Janda NCT I</b>	
4. Well Location Unit Letter <b>H</b> : <b>1650</b> Feet From The <b>North</b> Line and <b>990</b> Feet From The <b>East</b> Line Section <b>2</b> Township <b>23S</b> Range <b>36E</b> NMPM <b>Lea</b> County 10. Elevation (Show whether DF, RKB, RT, GR, etc.): <b>3452' GR</b>		8. Well No. <b>1</b>	
9. Pool name or Wildcat <b>Jalmat Gas</b>			
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER: <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABAN. <input type="checkbox"/> CASING TEST AND CMT JO <input type="checkbox"/> OTHER: <b>Temporary Abandonment</b> <input checked="" type="checkbox"/>	
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.			

**Description of Work:**

- 1) Set 5-1/2" CIBP @ 2950' w/2 sx cement
- 2) Presure tested 5-1/2" casing to 530 psi for 30 minutes. **8/13/97**  
(Chart attached). Test witnessed by Gary Wink.
- 3) Temporarily abandoned wellbore.

*Tril. Sampled by [unclear] 9-4-2007*

I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE	<i>Robin S. McCauley</i>	TITLE	Technical Assistant
DATE:		8/25/97	
TYPE OR PRINT NAME	Robin S. McCauley	TELEPHONE NO.	915-685-1961
ORIGINAL SIGNED BY <b>CLINTON WILLIAMS</b>		DATE <b>SEP 4 1997</b>	
APPROVED BY	DISTRICT I SUPERVISOR	DATE	
CONDITIONS OF APPROVAL, IF ANY:			

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