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U.S.G.S.

LAND OFFICE

OPERATOR

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease

State ☒

Fee ☐

5. State Oil & Gas Lease No.

B-934

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 ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Humble Oil & Refining Company

3. Address of Operator
Box 2100, Hobbs, New Mexico

4. Location of Well
UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM
THE West LINE, SECTION 20 TOWNSHIP 22S RANGE 37E NMPM.

7. Unit Agreement Name

8. Form or Lease Name
N. M. State M

9. Well No.
13

10. Field and Pool, or Wildcat
Arrowhead

15. Elevation (Show whether DF, RT, GR, etc.)
3387 RDB

12. County
Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☒ *
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER *Additional Recovery Area ☐
R-2891 of 4-8-65

PLUS AND ABANDON ☐
CHANGE PLANS ☐
REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Presently producing well to be converted to injection well.

- Run squeeze retainer on 2-inch tubing and set retainer at 3650 feet; squeeze perforations from 3658 to 3662 and open hole from 3668 to 3687 with 50 sacks regular neat cement.
- Perforate with one selectively fired radioactive jet at each of the following depths: 3574, 3582, 3599, 3601, 3603 and 3619 feet.
- Frac with 10,000 gallons slick water with 1# sand per gallon using ball sealers.
Place well on injection.

/mcb

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

SIGNED E. J. Davis TITLE Dist. Admin. Supvr. DATE 4-19-65

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: