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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 <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Atlantic Richfield Company		8. Farm or Lease Name Curran Jones WN
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240		9. Well No. 10
4. Location of Well UNIT LETTER <u>C</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>West</u> LINE, SECTION <u>34</u> TOWNSHIP <u>22S</u> RANGE <u>36E</u> NMPM.		10. Field and Pool, or Wildcat Jalmat
15. Elevation (Show whether DF, RT, GR, etc.) 3474' GR		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 <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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <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.

Commenced drilling operations @ 3 PM 6/13/74. Drld 11" hole to 405'. Circ 30 mins. Ran 12 jts (385') 8-5/8" OD 8rd 24# J-55 ST&C csg, 1 - 8-5/8" OD Guide Shoe & Float Collar set @ 400'. Cmtd w/200 sx Cl C cmt w/2% CaCl & 1/4# Flocele/sk added. Bumped plug w/1000# OK. Circulated to surface. WOC 24 hrs. Tested csg to 1000# for 30 mins. OK. Drlg ahead.

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

SIGNED H. J. Berrard TITLE Dist. Drlg. Supv. DATE 6/18/74

APPROVED BY Joe D. Ramey TITLE Dist. I. Supv. DATE

CONDITIONS OF APPROVAL, IF ANY: