

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

## OIL CONSERVATION DIVISION

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.  
30-025-26480

Indicate Type of Lease  
STATE ☐ FEE ☒

State Oil & Gas Lease No.  
14916

Lease Name or Unit Agreement Name  
Laura J. May

Well No.  
1

Pool name or Wildcat  
Blinebry Oil & Gas / Drinkard

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.)			
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>			
Name of Operator Arch Petroleum Inc.			
Address of Operator 10 Desta Drive, Suite 420E Midland, Texas 79705			
Well Location Unit Letter <u>H</u> : <u>1830</u> Feet From The <u>North</u> Line and <u>480</u> Feet From The <u>East</u> Line Section <u>27</u> Township <u>22S</u> Range <u>37E</u> NMPM <u>Lea</u> County			
Elevation (Show whether DF, RKB, RT, GR, etc.) 3335' GL			

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Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: DHC - 1767 ☒

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.

03/01/98  
Tag Retrievable Bridge Plug @ 6215'  
Pull RBP out of hole.  
Clean out hole to 6472'  
RIH w/205 jts 2-3/8" tbg; SN @ 6407'

5/01/98  
Began producing

Blinebry Oil & Gas 5474'-5920'  
Drinkard 6402'-6459'

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

SIGNATURE Robin S. McCarley TITLE Technical Administrator DATE 06-10-98  
TYPE OR PRINT NAME Robin S. McCarley TELEPHONE NO. (915) 685-1961

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: