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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

8a. Indicate Type of Lease	
State <input type="checkbox"/>	Permit <input checked="" type="checkbox"/>

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR ANY OTHER PURPOSES. IT IS TO BE USED ONLY FOR THE PURPOSES INDICATED HEREIN. USE "APPLICATION FOR PERMIT TO DRILL" (FORM O-101) FOR EACH PROPOSAL.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	8. Name or Lease Name J. P. Combest
2. Name of Operator Atlantic Richfield Company	9. Well No. 2
3. Address of Operator P. O. Box 1978, Roswell, New Mexico 88201	10. Field and Pool, or Wildcat Langlie-Mattix-7 R
4. Location of Well UNIT LETTER G , 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 35 TOWNSHIP 23-S RANGE 36-E N.M.P.M.	12. County Lea
15. Elevation (Show whether DF, RT, GR, etc.)	

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER Temporarily Abandon <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input 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.

This well is producing less than 2 BOPD, operating costs have risen to \$3.40/bbl. We request permission to temporarily abandon this well by pulling rods and tubing and installing master valve to cap well.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED A.D. Butcher	TITLE Dist. Drlg. Supervisor	DATE 2/25/71
APPROVED BY [Signature]	TITLE [Signature]	DATE MAR 1 1971
CONDITIONS OF APPROVAL, IF ANY:		