

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-09567
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. 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.)

7. Lease Name or Unit Agreement Name	G.W. TOBY WN
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1. Type of Well:	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
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8. Well No.	2
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2. Name of Operator	ARCO OIL AND GAS COMPANY
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9. Pool name or Wildcat	LANGLIE MATTIX 7 RQ GB
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3. Address of Operator	P.O. 1710 HOBBS N.M. 88240
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4. Well Location	Unit Letter <u>A</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>EAST</u> Line
	Section <u>13</u> Township <u>24S</u> Range <u>36E</u> NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3318 GR
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11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: ABANDON LANGLIE MATTIX - <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.

TD 3853, PBD 3230

SET CIBP @ 3230, CSG WOULD NOT TEST. RAN CBL TOC @ 3000', SET CMT RET @ 3230 AND

SQUEEZED @ 1300# W/200 SX CMT, SHOT 4 .40" HOLES @ 2980 & CIRC 400 SX CLASS C CMT
BETWEEN 7" & 9 5/8" CSG TO SURFACE.

CLEAN OUT PBD 3230, TEST CSG TO 500# FOR 30 MIN, NO LEAKS.

ZONE ABANDON 5-28-93 CHART ATTACHED

PREPAIR TO RECOMPLETE TO JALMAT.

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

SIGNATURE James Cogburn TITLE OPERATIONS COORDINATOR DATE 7-1-93
TYPE OR PRINT NAME JAMES COGBURN TELEPHONE NO. 391-1621

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JUL 06 1993

