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State of New Mexico

Form C-103

Energy, Minerals and Natural Resources Department Revised 1-1-89 District Office OIL CONSERVATION DIVISION DISTRICT WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-09567 Santa Fe, New Mexico 87504-2088 DISTRICT II 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 FEE X DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: G. W. Toby WHELE X WELL 2. Name of Operator 8. Well No. ARCO Oil and Gas Company 9. Pool same or Wildcat 1. Address of Operator Langlie Mattix 7RQ GB 88241-1710 P.O. Box 1710 - Hobbs, New Mexico Well Location 660 East _ : __660 Feet From The _ North Line and Feet From The Line Lea thip 24S Range 36E 10. Elevation (Show whether DF, RKB, RT, GR, etc.) County **NMPM** 13 Township Section 3318 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: **ALTERING CASING** PLUG AND ABANDON REMEDIAL WORK PERFORM REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CHANGE PLANS TEMPORARILY ABANDON CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** Shut In OTHER: OTHER: 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. 04/02/92 - Well Shut In For Evaluation I hereby certify that the information above is true and complete to the best of my knowledge and belief. _____ Operations Coordinator SKINATURE TELEPHONE NO. 391-1600 James D. Cogburn TYPE OR PRINT NAME (This space for State Use)

CONDITIONS OF AFFROVAL, IF ANY

APPROVED BY-