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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator ARCO Oil and Gas Company Division of Atlantic Richfield Company	8. Farm or Lease Name Melba Goins
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240	9. Well No. 2-Y
4. Location of Well UNIT LETTER I, 2310 FEET FROM THE South LINE AND 336 FEET FROM THE East LINE, SECTION 27 TOWNSHIP 23S RANGE 37E NMPM.	10. Field and Pool, or Wildcat Langlie Mattix 7R Qn
15. Elevation (Show whether DF, RT, GR, etc.) 3269' GR	12. County Lea

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"/>	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 type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Repair Csg Leak, Acidize	CASING TEST AND CEMENT JOBS <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 1703.

RU, POH w/rods & pump. Install BOP & POH w/tbg.

1. RIH w/BP & pkr, locate holes in csg. Cmt squeeze holes in csg w/amount & kind of cmt to be determined by pump-in rate. DO squeeze job & press test. Re-squeeze holes if necessary, DO & pressure test.
2. Acidize Queen perms 3470-3540' w/1500 gals 15% NEFE acid & flush to btm perms w/2% KCL wtr.
3. Swab back & test. RIH w/compl assy, pump & rods, return to production.

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

SIGNED Elizabeth L. Bush TITLE Drlg. Engr. DATE 7/27/84

ORIGINAL REVIEWED BY JERRY SEXTON  
DISTRICT SUPERVISOR

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

CONDITIONS OF APPROVAL, IF ANY:

AUG - 1 1984