Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

District Office

OIL CONSERVATION DIVISION

P.O. Box 2088			
Santa Fe, New Mexico 87504-2088			
P.O. Box 1980, Hobbs, NM 88240	ARINO (gesigned by	OCD on New Wolle)	
DISTRICT II	API NO. (assigned by OCD on New Wells) 30-025-10852		
P.O. Drawer Dd, Artesia, NM 88210 DISTRICT III	5. Indicate Type of I		
1000 Rio Brazos Rd., Aztec, Nm 87410	s	TATE FEEX	
	6. State Oil & Gas I	Lease No.	
		16233	
SUNDRY NOTICES AND REPORTS ON WELLS			
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAC	7. Lease Name or L	7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"	_		
(FORM C-101) FOR SUCH PROPOSALS.)		E. C. Hill A"	
1. Type of Well: OIL GAS			
WELL X WELL OTHER	ļ		
2. Name of Operator	8. Well No.		
Arch Petroleum, Inc,		3	
3. Address of Operator	9. Pool name or Wi		
10 Desta Drive, Suite 420E Midlnad, Texas 79705	Imperial Tubb Drinkard		
Unit Letter O : 660 Feet From The South Line and		eet From The East Line	
Section 27 Township 23S Range 10. Elevation(Show whether DF, RKB, RT, GR, etc.)	37E N	MPM Lea County	
3277' DF			
11 Check Appropriate Box to Indecate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	Α	LTER CASING	
TEMPORARILY ABANDON X CHANGE PLANS X COMMENCE DRILLING OPNS.	P	LUG AND ABAN.	
PULL OR ALTER CASING CASING TEST AND CMT JOB			
OTHER:	-		
12. Describe Proposed or Completed Operations(Clearly state all pertinent details, and give pertinent dates, including			
esticated date of starting any proposed work) SEE RULE 1103.			
4) MIDII			
1) MIRU.			
2) GIH w/packer on tbg.3) Isolate csg leak above CIBP @ 5300'.			
4) POOH.5) GIH w/cement retainer on production tbg and set @ +/- 50' above leak.			
·			
6) Squeeze w/cement.			
7) Test csg @ 500 psi for 30 minutes. (Record on chart for OCD subsequent report)			
8) Temporarily abandon wellbore.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNITURE FORM & Marley TITLE Technical Assistant	DATE:	8/25/97	
S. Lin C. Manager	TELEPHONE NO.	(915) 685-1961	
TYPE OR PRINT NAME Robin S. McCarley	TELEFHONE NO.	(0.10/ 000 1001	
Orig. Signed by Paul Rautz	5475	OCT 06 1997	
APPROVED BY FAIL TOTAL TITLE CONDITIONS OF APPROVAL, IPANY:	DATE	03/	
CONDITIONS OF AFFROVAL, IF ANT.			