

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

M. OIL CONS. COMMISSION
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

Budget Bureau No. 1004-0135
Expires: March 31, 1993

RECEIVED

APR 14 2 25 AM '94

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Arch Petroleum Inc.

3. Address and Telephone No.

10 Desta Drive, Ste. 420E, Midland, TX 79705 (915) 685-1961

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660 FNL & 660 FWL of Sec. 27, T23S, R37E

5. Lease Designation and Serial No.

LC-030187

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

C. E. LaMunyon

9. API Well No.

30-025-10854

10. Field and Pool, or Exploratory Area

Teague Abo

11. County or Parish, State

Lea

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other _____
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Repair tubing leak, re-dress packer, and possibly replace production string

14. I hereby certify that the foregoing is true and correct ~

Signed Merick S. Vandenslice

Title Operations Manager

Date 4/11/94

(This space for Federal or State office use)

Approved by Orig. L. [Signature]

Title Director

Date 5/25/94

Conditions of approval, if any: