DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

2040 Pacheco St.

30-023-22234	
30-025-22254	
WELL API NO.	

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

Santa Fe, NM 87505

	SIAIE	FEE [
State Oil & Gas Lease No).	
14926		

<u>DISTRIÇT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410			₅State Oil & Gas Lease No.					
			14926					
SUNDRY NOTICES AND REPORTS ON WELLS								
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				₁Lease Name or Unit Agreement Name				
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				Saltmount				
Type of Well: OIL WELL	SAS VELL		OTHER					
2Name of Operator						₅Well No.		
Arch Petroleum Inc.						2		
3Address of Operator						Pool name or Wildca		300)
300 N. Marienfeld, Suite	600 M	idland, Texas 7970	<u>1</u>			Teague Paddock	Colliebly (56	300)
₄Well Location			0		1980		East	
Unit Letter O:	660	_ Feet From The	South	Line and	1900	Feet From The	Last	Line
Section	21	Township	238	Range	37E	NMPM	LEA	County
			-	DF, RKB, RT, GR,	etc.)			
	ئان <u>ۇ</u> لىن	3303' (3L					
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data								
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					= :			
PERFORM REMEDIAL WORK		PLUG AND A	ABANDON	REMEDIAL	WORK		ALTERING CA	ASING
TEMPORARILY ABANDON		CHANGE PL	ANS	COMMENC	E DRILLING C	OPNS.	PLUG AND AN	IBANDONMENT

CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: PLUG TUBB DRINKARD AND ADD PERFS TO PADDOCK OTHER:

12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

It is proposed to

- 1) Set CIBP @ 5300'. Test to 3000 PSI.
- 2) Perforate 5160-5190' w/2 SPF.
- 3) Acidize perfs w/1000 gallons 15% HCL.
- 4) Swab.
- 5) Frac perfs w/11,000 gallons and 76,000# 16/30 sand.
- 6) Reverse out sand.
- 7) Return well to production.

CONDITIONS OF APPROVAL, IF ANY:

I hereby certify that the information above is true and complete to the best of residual signature.	ny knowledge and belief. TITLE Production Tech.	DATE 07-09-99
TYPE OR PRINT NAME Robin S. McCarley		TELEPHONE NO. 915-685-8100
(This space for State Use)	TITLE	DATE COMPANY