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DISTRIBUTION		Form Count Supersedes Old	
SANTA FE	NEW MEXICO OU	C-102 and C-103	
FILE NEW MEXICO OIL CONSERVATION COMMISSION			Effective 1-1-65
U.S.G.S.			Eq. Indiana Way - 61
LAND OFFICE			5a. Indicate Type of Lease
OPERATOR			State Fee X
	J		5. State Oil & Gas Lease No.
STINIDE	V NOTICES AND DEDOCTO		······
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 GAS WELL WELL	OTHER.		7. Unit Agreement Name
2. Name of Operator	OTHER.		
John Yuronka			8. Farm or Lease Name
3. Address of Operator			ARCO CRUMP
	dg., Midland, Tex	202 70701	9. Well No.
4. Location of Well	.ug., midiand, lex	as 79701	<u> </u>
	10. Field and Pool, or Wildcat		
UNIT LETTER I 660 FEET FROM THE EAST LINE AND 1980 FEET FROM			Langlie Mattix
Courth			
THE South LINE, SECTION 1 TOWNSHIP 24-S RANGE 36-E NMPM.			
, , , , , , , , , , , , , , , , , , ,			
	15. Elevation (Show wh		12. County
	3335 D		Lea
Check A	Appropriate Box To Indica	te Nature of Notice, Report or Ot	her Data
NOTICE OF IN	ITENTION TO:		T REPORT OF:
	ı		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	. CHANGE PLANS	CASING TEST AND CEMENT JOB	Too and abandonment
		OTHER	
OTHER			
17. Describe Proposed or Completed Op work) SEE RULE 1103.	erations (Clearly state all pertinen	t details, and give pertinent dates, including	estimated date of starting any proposed
,			
1. Pull rods, pu	ump and tubing.		
 Pull rods, pump and tubing. Rerun tubing w/packer and treat perforations w/3500 gals. acid. 			
3. Swab well.			
4. Pull packer and tubing and rerun tubing, rods, and pump to clean-up			
well for approximately one week.			
5. Frac with 7500 gals. of gelled 2% KCl water and 7500 gals. of CO2			
with 12 500#	of $20-40$ sand and	8,000# of 10-20 sand.	gais. Of CO2
6. Place well or		0,000# 01 10 20 Sand.	
o. Tidee well of	production.	•	
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		. •	
	1		
		•	
18. I hereby certify that the information	above is true and complete to the	est of my knowledge and helief	
^ ^	C	my movedage and Delici.	
(Jolean I)	m. Va	A., + b a 1 A +	/ 25 70
SIGNED TO TO	TITLE	Authorized Agent	DATE 4-25-79
Orig. Signed	- N		
Jerry Sextor	**		MAY 4 1979
APPROVED BY Dist 1, Support Conditions of APPROVAL, IF ANY			DATE
	v .	•	