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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

<p>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.)</p>		<p>5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/></p> <p>5. State Oil & Gas Lease No.</p>
<p>1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-</p> <p>2. Name of Operator Atlantic Richfield Company</p> <p>3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240</p> <p>4. Location of Well UNIT LETTER <u>I</u>, <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>34</u> TOWNSHIP <u>23S</u> RANGE <u>36E</u> NMPM.</p>	<p>7. Unit Agreement Name</p> <p>8. Farm or Lease Name W. B. Guthrie WN</p> <p>9. Well No. 2</p> <p>10. Field and Pool, or Wildcat Jalmat-Yates</p>	
<p>15. Elevation (Show whether DF, RT, GR, etc.) 3389' DF</p>		<p>12. County Lea</p>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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 type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
		OTHER <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 1103.

Production from perfs 3112-3454' has declined to about 380 MCF/GPD. In an attempt to raise this to top allowable of 575 MCF/GPD, we propose to treat w/10,000 gallons of slick 9#/gal. brine containing 18,000# of sand.

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

SIGNED P.D. Bretcher TITLE Dist. Drlg. Supv. DATE 10/31/73

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: