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APPROVED BY___

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico

Form C-103

to Appropriate District Office	Energy, Minerals and Natural Resources Department		Revised 1-1-89
OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs NM 88240 P.O. Box 2088		WELL API NO. 30-025-24460	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE X 6. State Oil & Gas Lease No.
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.)			7. Lease Name or Unit Agreement Name JOHN P COMBEST WN
1. Type of Well: OIL GAS WELL WELL X OTHER			Joint Comment with
2. Name of Operator ARCO Permian			8. Well No.
3. Address of Operator P.O. Box 1710, Hobbs, New Mexico 88240			9. Pool name or Wildcat JALMAT-YATES GAS
4. Well Location Unit Letter E 1650	Feet From The NORTH	Line and 660	Feet From The WEST Line
Section 35			NMPM LEA County
	10. Elevation (Show whether 3371 DF		
NOTICE OF IN	ppropriate Box to Indicate	1	, Report, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLIN		ריין ריין
PULL OR ALTER CASING	CHANGE FEARS	CASING TEST AND CH	
OTHER: ADD PERFS AND STIMULA	ATE X	OTHER:	
12. Describe Proposed or Completed Op			s, including estimated date of starting any proposed
work) SEE RULE 1103.	(1)		
TD:3669' PB:3669' PREF: 3039'-33 ADD PERFS 2950'-3367'AND STIM			
			-
I hereby certify that the information above is	true and complete to the best of my knowledge	and belief.	
SIGNATURE BUBYY	$\gamma \sim 4/\ldots$	E OPERATIONS COO	PRDINATOR DATE $6/5/94$
TYPE OR PRINT NAME BOB MANTHEI			TELEPHONE NO. 391-1602
(This space for State Use)			
			JUN 21 199