STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [ ] Fee [X]

5. 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. Unit Agreement Name

1. OIL WELL [ ] GAS WELL [X] OTHER-

2. Name of Operator
ARCO Oil and Gas Company
Division of Atlantic Richfield Company

8. Farm or Lease Name
G. W. Toby ~~Gas~~ WN Gas Com

3. Address of Operator
P. O. Box 1710, Hobbs, New Mexico 88240

9. Well No.
4

4. Location of Well
UNIT LETTER I, 1880 FEET FROM THE South LINE AND 760 FEET FROM THE East LINE, SECTION 12 TOWNSHIP 24S RANGE 36E NMPM.

10. Field and Pool, or Wildcat
Jalmat Yates Gas

15. Elevation (Show whether DF, RT, GR, etc.)
3319' GR

12. County
Lea

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 [ ]	
OTHER Acidize & Frac Treat [X]		OTHER [ ]	

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.

1. Rig up, install BOP & POH w/tbg.
2. Run & set RBP @ 2925', test csg to 1500#, spot 2 sx sd on BP.
3. Run CBL TOC to surf. If no cmt in 8-5/8" x 4½" csg annulus, perforate 4½" csg approx 25' above TOC. RIH w/cmt retr, set approx 50' above perfs & squeeze 4½" perfs w/Cl C cmt w/ 2% CaCl w/volume necessary to circ cmt to surf. WOC. Drill cmt & retr, test squeeze job to 1500# for 30 mins.
4. Reset BP @ 3420' & pkr @ 2920'. Treat perfs 2945-3401' w/1500 gals 15% HCL acid w/1000 gal cross linked w/2% KCL wtr, 3800 gals CO_2, 14,000# sd & 3800 gals frac fluid.
5. Swab back load & test. POH w/RBP & pkr.
6. RIH w/compl assy. Return to production.

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

SIGNED [signature] TITLE Dist. Drlg. Supt. DATE 3/6/80

APPROVED BY _____ TITLE _____ DATE MAR 10 1980

CONDITIONS OF APPROVAL, IF ANY: