

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

OIL CONSERVATION DIVISION

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

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

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
30-025-26630

5. Indicate Type of Lease  
STATE ☐ FEE ☒

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  
WB GUTHRIE WN

1. Type of Well:  
OIL WELL ☐ GAS WELL ☒ OTHER

8. Well No.  
3

2. Name of Operator  
ARCO Oil and Gas Company

9. Pool name or Wildcat  
JALMAT-TAN/YATES/TRIVERS

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

4. Well Location  
Unit Letter J : 1980 Feet From The SOUTH Line and 1980' Feet From The EAST Line

Section 34 Township 23 SOUTH Range 36 EAST NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3380' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

12. 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.

TD 3750' PBD 3312' PERFS 3082'-3287'  
ADD 19.40" PERFORATIONS 3082'-3288'  
STIMULATE  
ACIDIZE W/ 3100 GAL 7 1/2% NEFE & FRAC W/ 200,240 LBS 12/20 SAND  
AND 120 TONS OF CO2  
RETURNED TO PRODUCTION ON 12-15-93  
12-23-93 FLOWED IN 24 HOURS 0 BO, 37 BW, 3 MCF

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

SIGNATURE Bob Manthei TITLE OPERATIONS COORDINATOR DATE 1-11-94

TYPE OR PRINT NAME BOB MANTHEI TELEPHONE NO. 391-1602

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JAN 12 1994

CONDITIONS OF APPROVAL, IF ANY: