

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

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐		5a. Indicate Type of Lease State ☐ Fee ☒
1. Name of Operator ARCO Oil & Gas Company Division of Atlantic Richfield Company		5. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240		7. Unit Agreement Name
4. Location of Well UNIT LETTER <u>0</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>24S</u> RANGE <u>36E</u> NNPM.		8. Farm or Lease Name Frederick H. Curry WN
		9. Well No. <u>3</u>
		10. Field and Pool, or Wldcat Langlie Mattix 7 R On
15. Elevation (Show whether DF, RT, GR, etc.) 3344.6' GL		12. County Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐ TEMPORARILY ABANDON ☐ PULL OR ALTER CASING ☐ OTHER ☐	PLUG AND ABANDON ☐ CHANGE PLANS ☐	REMEDIAL WORK ☐ COMMENCE DRILLING OPNS. ☒ CASING TEST AND CEMENT JOBS ☒ surface OTHER ☐	ALTERING CASING ☐ PLUG AND ABANDONMENT ☐
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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.

Spudded 12 1/4" hole @ 9:30 PM 7-9-80. Drld to 1161'. RIH w/8-5/8" OD 32# K-55 csg set @ 1161', FC @ 1110'. Cmt'd w/ 450 sx C1 "C" cmt, 2% CaCl, 5# gilsonite, 1/4# flocele/sk, 4% gel & 200 sx C1 "C" w/2% CaCl. Circ 125 sx cmt to surf. WOC 18 hrs. Drld out plug, FC & cmt. Pressure test csg to 1000# for 30 mins, OK.

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 7/15/80

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: