

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

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

API NO. (assigned by OCD on New Wells) 30-025-11211	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. 014915	
7. Lease Name or Unit Agreement Name LILLIE	
8. Well No. 3	
9. Pool name or Wildcat FOWLER SILURIAN	

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL <input type="checkbox"/> GAS <input type="checkbox"/> WELL <input type="checkbox"/> WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator ARCH PETROLEUM INC.	
3. Address of Operator 10 DESTA DRIVE, SUITE 420E, MIDLAND, TX 79705	
4. Well Location Unit Letter E : 2310 Feet From The NORTH Section 23 Township 24S Range 37E Line 330 Feet From The WEST Line NMPM LEA County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) GL=3224'	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABAN. <input type="checkbox"/> CASING TEST AND CMT JOB <input type="checkbox"/> OTHER: Abandon Ellenburger & Recomplete in Silurian <input checked="" type="checkbox"/>

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.

5/6/96 MIRU WS. POH w/PE. Run GR-CL-PND log f/7950-6200'. Set 7" CIBP @ 7190'.
RIH w/csg gun & perf Silurian Formation f/7168'-84'(2- 1/2" JHPF, total 16 holes).
Spot 1 bbl 15% HCL acid across perfs. POH to 7129'. Set pkr and breakdown Silurian perfs
f/7950'-6200'. Pbkdn=2850#. Treat w/500 gals 15% HCL @ 2.6 BPM @ 1690#. Flush to btm
perf. ISIP=1300#. 5 min SIP=1150#, 10 min SIP=1150#, & 15 min SIP=950#. CI well.
RU to swab. TP=789#. Flow back to tank. Well died. IFL=surface. Swabbed 7 runs & swabbed dry.
R/46 bbls 100% load water. SI for 1 hr. Had no fluid entry. CI well. SDFN. (24 BLWTR)
TP=125#. Blow dn well. RU to swab. IFL=5450' FS. Made 2 runs & swabbed dry. Made 1
run per hour. Total 5 runs. Had very little fluid entry. Total recovered 2 BBLS 100% water.
CI well. SDFN (22 BLWTR).
TP=180#. Blew dn to test tank. RU to swab. IFL=500' above SN. Made 2 swab runs.
Recovered 2 bbls water. RD swab. POH w/pkr & tbg. CI well. SDFN.
Completion attempt in Silurian was unsuccessful. Well SI. 5/13/96

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

SIGNATURE <i>Bobbie Brooks</i>	TITLE PROD. ANALYST	DATE: 6/12/96
TYPE OR PRINT NAME BOBBIE BROOKS		TELEPHONE NO. 915/685-1961

APPROVED BY <i>[Signature]</i>	TITLE <i>[Signature]</i>	DATE JUL 8 1996
CONDITIONS OF APPROVAL, IF ANY:		

20 Fowler Ellenburger & 20