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U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. 157	
7. Unit Agreement Name	
8. Farm or Lease Name State 157 "E"	
9. Well No. 1	
10. Field and Pool, or Wildcat Jalmat-Yates	
12. County Lea	

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Atlantic Richfield Company	8. Farm or Lease Name State 157 "E"
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240	9. Well No. 1
4. Location of Well UNIT LETTER <u>G</u> <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM THE <u>East</u> LINE, SECTION <u>32</u> TOWNSHIP <u>24S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Jalmat-Yates
15. Elevation (Show whether DF, RT, GR, etc.) 3258' RKB	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
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.

Started operations on 10/1/73. CO sand & salt 3014-3146'. Added perfs w/1 - 1/2" JS.ea @ 2904', 08, 12, 16, 20, 52, 56, 60, 64, 68, 3105', 09, 13, 17, 21, 25, 29, 33, 37, 41 & 3144' (GR-N log - 21 holes) Treated perfs 3105-3144' w/1000 gal 15% HCl acid & ball sealers. Treated perfs 2904-2968' w/1000 gal 15% HCl acid & ball sealers. Ran 2-3/8" tubing & SN to 3055'. Swabbed well in - on test ending 10/24/73, well flowed at rate of 80 MCFGPD. Work-over was unsuccessful - no increase in production.

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

SIGNED P. D. Dretcher TITLE Dist. Drlg. Supv. DATE 10/26/73

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: