

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-11562
Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
State Oil & Gas Lease No. 14912
Lease Name or Unit Agreement Name Learcy McBuffington
Well No. 1
Pool name or Wildcat Langlie Mattix 7 Rvrs Queen GB

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.)	
Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
Name of Operator Arch Petroleum Inc.	
Address of Operator 10 Desta Drive, Suite 420E midland, Texas	
Well Location Unit Letter <u>L</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>13</u> Township <u>25S</u> Range <u>37E</u> NMPM <u>Lea</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.)	

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 ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

We propose to Squeeze the current open hole completion and perforate the Langlie Mattix Queen.

- 1) Squeeze open hole @ 3101' w/200 sx cement.
- 2) Perforate 3035' - 3086'. 17 selections; Total 34 holes.
- 3) Frac perforations.
- 4) Flow back and test.
- 5) Return well to production.

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

SIGNATURE Robin S. McCarley TITLE Technical Administrator DATE 06-22-98

TYPE OR PRINT NAME Robin S. McCarley

TELEPHONE NO. (915) 685-1961

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS

APPROVED BY Chris Williams TITLE Director DATE 06-22-98

CONDITIONS OF APPROVAL, IF ANY: