

Submit 3 Copies  
to Appropriate  
District Office

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2008

WELL API NO.

30-025-11753 ✓

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 DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS)

1. Type of Well:

OIL  
WELL ☐

GAS  
WELL ☐

other ☒ Water Supply

2. Name of Operator

ARCO OIL and GAS COMPANY

3. Address of Operator

P.O. Box 1610, Midland, Texas 79702

4. Well Location

Unit Letter D : 660 Feet From The North Line and 990 Feet from The West Line

Section 24

Township 25S

Range 37E

NMPM Lea

County

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

3082

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) Recomplete as San Andres WSW ☒

12. Describe Proposed or completed Operation (Clearly state all pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

4-08-93. RUPU. RIH & tag CIBP at 6500. Spot 10 sx "C" cmt on CIBP f/6500-6400. Spot 45 sx "C" cmt f/5800-5350. Spot 10 sx "C" cmt f/4950-4850. Press test csg to 500#. Perf San Andres f/3476-4153 (78 - .52" holes). Acidize w/10,000 gals. Swab test. RDPU 4-15-93.

4-19-93. RUPU. RIH w/Reda ESP on 2-7/8 tbg to 2053.

4-28-93. In 24 hrs pmpd 0 BO, 0 meF, 1500 BW.

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

SIGNATURE Ken W. Gosnell

TITLE Regulatory Coordinator

DATE 4-27-93

TYPE OR PRINT NAME Ken W. Gosnell

TELEPHONE (915) 688-5672

(This space for State Use) Orig. Signed by  
Paul Kautz  
Geologist

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS FOR APPROVAL, IF ANY:

MAY 05 1993

3A furnished per 241