

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. <u>30-025-11921</u>
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. <u>B-229</u>
7. Lease Name or Unit Agreement Name <u>South Justis Unit "E"</u>
8. Well No. <u>29</u>
9. Pool name or Wildcat <u>Justis Blbry-Tubb-Dkrd</u>
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER ☐	2. Name of Operator <u>ARCO Permian</u>
3. Address of Operator <u>P. O. Box 1610, Midland, Texas 79702</u>	4. Well Location Unit Letter <u>L</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>West</u> Line

Section 36 Township 25S Range 37E NMPM Lea County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: ☒

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.

08-05-96. RUPU. POH w/CA. Set CIBP w/35' cmt at 5870. RIN w/CA:
2 3/8 Tbg, rods & pump to 5815. RDPV 8-6-96

P&A OH 5900-6100
Current Prod Interval 5050-5826

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

SIGNATURE Ken W. Gosnell TITLE Agent DATE 8-22-96
TYPE OR PRINT NAME Ken W. Gosnell 915/688-5672 TELEPHONE NO.

(This space for State Use)

ORIGINAL FILED IN COPY SECTION
DISTRICT I SUPERVISOR

APPROVED BY _____ DATE AUG 28 1996

CONDITIONS OF APPROVAL, IF ANY:

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