

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.

30-025-20014

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 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

ARCO OIL AND GAS COMPANY

3. Address of Operator

P. O. Box 1610, Midland, Texas 79702

4. Well Location

Unit Letter C : 990 Feet From The North Line and 1650 Feet From The West Line

Section

25

Township

25S

Range

37E

NMPM

Lea

County

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

3064 GR

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: Deepen & convert to water injection ☒

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.

11-23-93 RUPU, POH w/CA. Press test csg f/4917-Surf to 500⁺. CO fill & junk to 5455. DO CIBP at 5455. CO cmt f/5470-5498. DO floatshoe. Drill 3-7/8 hole f/5500-6050. Ran GR/CNL/CCL f/6050-4500. Perf 4-1/2 csg @ 5464, 5467, 5474, 5482. Acidized perfs 4964-5482 & OH 5499-6050 w/10,000 gals. RIH w/injection CA: 2-3/8 LPC tbg & pkr set at 4885. Ran csg integrity test to 500⁺ for 30 minutes. RDPU 12-21-93.

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 2-17-94

TYPE OR PRINT NAME Ken W. Gosnell

915/688-5672

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FEB 23 1994

