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. 30-025-23838

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.)

7. Lease Name or Unit Agreement Name: SOUTH JUSTIS UNIT "G"

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator: ARCO Permian

8. Well No. 14

3. Address of Operator: P.O.BOX 1610,MIDLAND, TX 79702

9. Pool name or Wildcat: JUSTIS BLBRY-TUBB-DKRD

4. Well Location
Unit Letter 0 : 430 Feet From The SOUTH Line and 2310 Feet From The EAST Line

Section 12 Township 25S Range 37E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3094.5 GR

11. **Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER:	☐			OTHER: ADD B-T-D PERFS & TREAT	☒		

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.

09-12-95. RUPU. POH W/PROD CA. RIH W/6 1/8 BIT 5426. DO CIBP. CO JUNK TBG & PKR TO 6010. PERF B-T-D F/5444-5797 (20 HOLES). ACIDIZED PERFS 5808-5919 W/1250 GALS. ACIDIZED PERFS 5444-5797 W/75 GALS EACH. RIH W/PROD CA:2 3/8 TBG,RODS & PUMP TO 5987. RDPU 09-23-95.

B-T-D PROD INTERVAL 5117-5919

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 09-29-95

TYPE OR PRINT NAME Ken W.Gosnell TELEPHONE NO. 915 688-5672

(This space for State Use)

ORIGINAL SIGNED BY DISTRICT SUPERVISOR

APPROVED BY DISTRICT I SUPERVISOR TITLE DATE OCT 04 1995

CONDITIONS OF APPROVAL, IF ANY:

MP


OCT 1995
Received
Hobbs
OCD