Submit 3 Copies to Appropriate

JCB

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office	TON DIVICION		
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION 2040 Pacheco St. Santa Fe, NM 87505		WELL API NO. 30 - 025 - 31860 5. Indicate Type of Lease	
SUNDRY NOTICES AND REPORTS ON W	ELLS		
(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 E	
1. Type of Well: OIL GAS WELL OTHER X			
2. Name of Operator		8. Well No. 190	
ARCO Permian 3. Address of Operator P.O. Box 1089 Eunice. NM 88231		9. Pool name or Wildcat JUSTIS BLINEBRY TUBB DRKD	
4. Well Location Unit Letter D : 200 Feet From The N	Line and1	50 Feet From The W Line	
24 Township 25S	Range 37E	NMPM LEA County	
Section Township 10. Elevation (Show w	hether DF, RKB, RT, GR, et 3104' KB. 3090' GL	(c.)	
11. Check Appropriate Box to Indica	te Nature of Notice	, Report, or Other Data	
NOTICE OF INTENTION TO:	SUI	BSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLIN	GIOPNS. PLUGIAND ABANDONMENT	
PULL OR ALTER CASING	CASING TEST AND C	EMENT JOB 🔲	
OTHER:	OTHER:		
12. Describe Proposed or Completed Operations (Clearly state all pertines work) SEE RULE 1103.	t details, and give pertinent d	ates, including estimated date of starting any proposed	
TD: 6050' PBD: 5560' PERFS: 5025-5556' 4-	1/2° CSG # 6050°		
10/14/97: MIRUPU. POH W/TBG & PKR. 10/15/97: RIH W/BIT, SCRAPER, & 2-3/8" WORKSTR SET CIBP @ 5560'. PERF 5025-5096' (RIH W/PPI TOOL & TBG.	(2 SPF/32 TOTAL)		
10/16/97: ACIDIZE 5025-5556' W/4600 GALS 15% H RIH W/GUIBERSON MODEL VI PKR & 2-3/8	F IPC (BG.	T00LS.	
10/17/97: SET PKR @ 4956'. RUN HIT. CHART AT	TACHED		
I hereby certify that the information above is true and complete to the best of my kno	wledge and belief.		
		Assistant DATE 10/28/97	
TYPE OR PRINT NAME Kellie D. Murrish		TELEPHONE NO. 505-394-1649	
(This space for State Use) RIGINAL SIGNED BY CHRIS WILLIAMS		.3 % £ 1% 2 - 24 mm	
DISTRICT I SUPERVISOR	TITLE	DATE 211 8 4 1897	
APPROVED BY		Å.	
TOR		\bigvee .	

