

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

2040 Pacheco St.
Santa Fe, NM 87505

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-31864

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

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

8. Well No.
D-232

2. Name of Operator

ARCO Permian

9. Pool name or Wildcat
JUSTIS BLINERY TUBB DRKD

3. Address of Operator

P.O. Box 1089 Eunice, NM 88231

4. Well Location

Unit Letter A : 140 Feet From The N Line and 1175 Feet From The E Line

Section 26 Township 25S Range 37E NMZM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3084' KB, 3070' GL

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 ☐
ILL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: ☐	

1. 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.

TD: 6050' PBD: 5480' PERFS: 5062-5440' 4-1/2" CSG @ 6050'

08/20/97: MIRUPU. POH W/TBG & PKR

08/21/97: RIH W/BIT, SCRAPER, AND 2-3/8" WORKSTRING

08/25/97: SET CIBP @ 5480'. PERF 5062-5081' (2 JCPF/14 TOTAL)

RIH W/PPI TOOL & TBG.

ACIDIZE 5062-5440' W/2400 GALS 15% HCL

POH W/TBG & PPI TOOLS.

08/26/97: RIH W/GUIBERSON MODEL VI PKR & 2-3/8" IPC TBG

SET PKR @ 4967'. RUN MIT, CHART ATTACHED.

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

NATURE Kellie D. Murrish TITLE Administrative Assistant DATE 09/05/97

OR PRINT NAME Kellie D. Murrish

TELEPHONE NO. 505-394-1649

space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

30-19-107

SIGNED BY _____ TITLE _____ DATE _____

CTIONS OF APPROVAL, IF ANY:



