

Submit 3 Copies
to Appropriate
District Office

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 87504-2008

WELL API NO.

30-025-31865

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

South Justis Unit "D"

8. Well No.

202

9. Pool Name or Wildcat

Justis Blbry-Tubb-Dkrd

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR 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 H : 2500 Feet From The North Line and 1000 Feet from The East Line

Section 23

Township 25S

Range 37E

NMPM Lea

County

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

3086 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) ☐

12. Describe Proposed or completed Operation (Clearly state all pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Spud 12-1/4 hole 4-24-93. TD'd at 1010. Ran 8-5/8 24# csg to 1010. Cmt'd w/570 sx PSL "C" + 6% gel + 2% CC + 1/4# CS (yld 1.86) followed by 200 sx "C" + 2% CC (yld 1.86) followed by 200 sx "C" + 2% CC (yld 1.32). Circ cmt to surf. WOC 11 hrs. Est compress strength 1500#. Press test csg to 1000# for 30 min. DA w/7-7/8 bit.

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

SIGNATURE

Ken W. Gosnell

TITLE

Regulatory Coordinator

DATE

4-28-93

TYPE OR PRINT NAME

Ken W. Gosnell

TELEPHONE

(915) 688-5672

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS FOR APPROVAL, IF ANY:

MAY 03 1993