

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

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

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-31983
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name South Justis Unit
8. Well No. 170
9. Pool name or Wildcat Justis Bly Tubb Drkd
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3081' GR

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 Permian	
3. Address of Operator P.O. Box 1089 Eunice, NM 88231	
4. Well Location Unit Letter K : 2250 Feet From The S Line and 1365 Feet From The W Line Section 13 Township 25S Range 37E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3081' 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: **Remove downhole regulators** ☐

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.

TD: 6050' PBD: 6004' PERFS: 5105-5964' KB: 3095' GL: 3081' 4-1/2" CSG @ 6050'

09/21/98: MIRUPU. POH w/pkrs, 2-3/8" tbg, and regulators. Remove regulators.

09/22/98: RIH w/Guibernson G-VI pkr & tbg. Set pkr @ 5013'. circ pkr fluid. Ran MIT CHART ATTACHED.

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

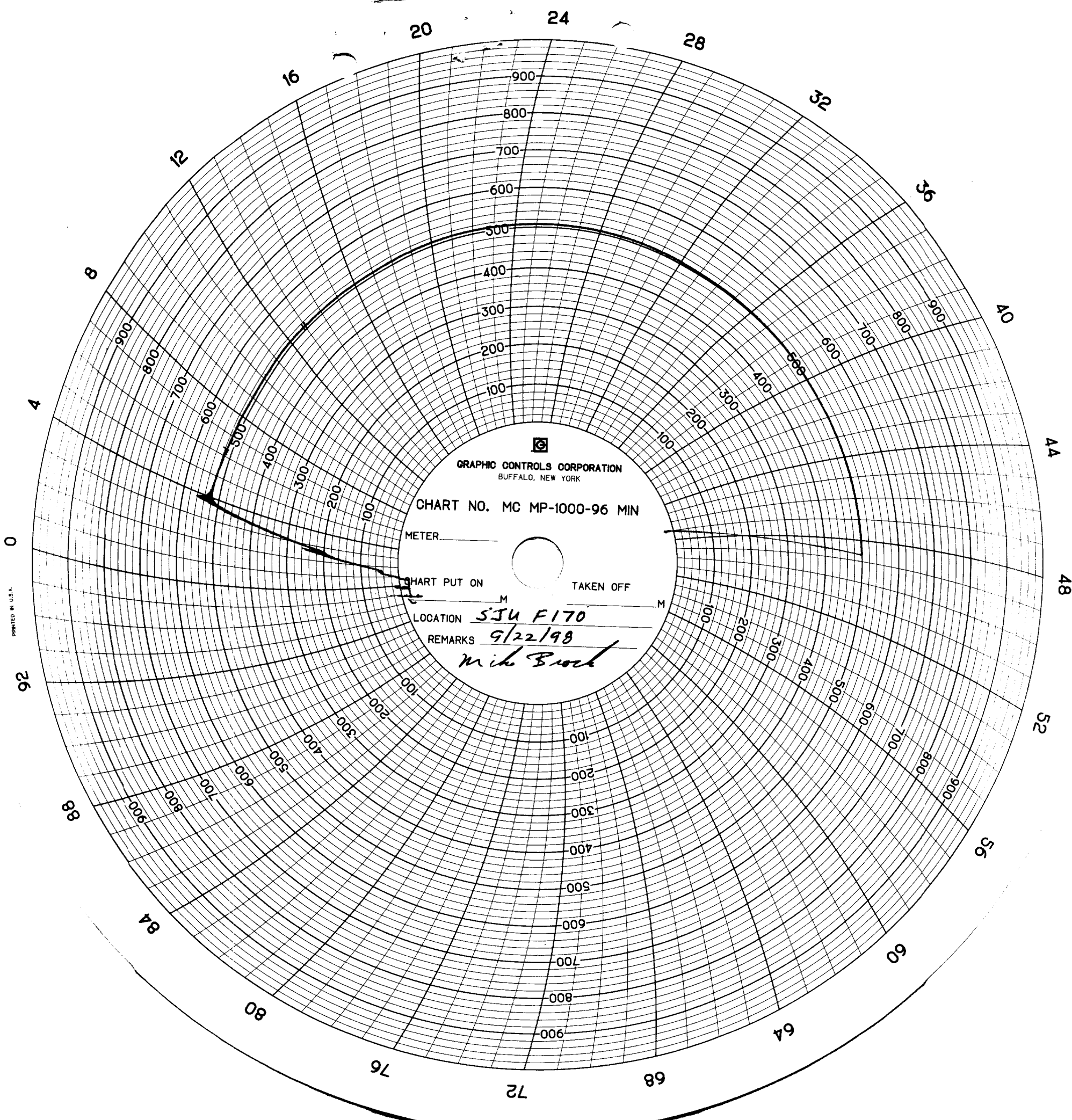
SIGNATURE Kellie D. Murrish TITLE Administrative Assistant DATE 10/02/98
TYPE OR PRINT NAME Kellie D. Murrish TELEPHONE NO. 505-394-1649

(This space for SIGNATURE)
ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

DISTRICT 1 SUPERVISOR

MAR 31 1999

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

CHART NO. MC MP-1000-96 MIN

METER _____

CHART PUT ON _____

TAKEN OFF _____

LOCATION

STU F170

REMARKS

9/22/98

Mike Brock

