

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.

30-025-31983

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.)

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 K : 2250 Feet From The South Line and 1365 Feet From The West Line

Section

13

Township

25S

Range

37E

NMPM

Lea

County

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

3081' GR

7. Lease Name or Unit Agreement Name

South Justis Unit "F"

8. Well No. 170

9. Pool name or Wildcat

Justis Blbry-Tubb-Dkrd

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: Convert to Water Injection ☒

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.

3-30-94 - RUPU. POH w/CA. RIH w/2-3/8" 1PC tbg & pkr set @ 5054'. Circ hole with 9.2# TBW. Ran csg integrity test, 510# for 30 min. RDPU 3-31-94.

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

4-27-94

TYPE OR PRINT NAME

Ken W. Gosnell

915/688-5672

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

APR 28 1994

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 23 1994

JOHN HOBBS  
OFFICE

