

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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.

30-025-32264

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 DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS)

1. Type of Well:  
OIL ☐ GAS ☐  
WELL ☐ WELL ☐ other Water Supply Well

South Justis Unit WSW

2. Name of Operator  
ARCO OIL and GAS COMPANY

8. Well No.

3

3. Address of Operator  
P.O. Box 1610, Midland, Texas 79702

9. Pool Name or Wildcat

USW San Andres

4. Well Location

Unit Letter F 2310 Feet From The North Line and 1700 Feet from The West Line

Section 23 Township 25S Range 37E NMPM Lea County

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

3071 GR

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 20" hole 12-09-93. TD'd at 1040. Ran 16" 65# csg to 1040. Cmt'd w/650 sx PSL "C" + 2% CC + 1/4# FC (yld 1.89) followed by 365 sx "C" + 2% CC (yld 1.32). Circ cmt to surf. WOC 16-3/4 hrs. Est comp strength 2000#. Press test csg to 1000# for 30 min. DA w/14-3/4 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 Agent DATE 12-15-93

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 \_\_\_\_\_  
CONDITIONS FOR APPROVAL, IF ANY:

DEC 17 1993  
DATE