

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.

30-025-32342

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 "F"

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

ARCO OIL AND GAS COMPANY

8. Well No.

14

3. Address of Operator

P. O. Box 1610, Midland, Texas 79702

9. Pool name or Wildcat

Justis Blbry-Tubb-Dkrd

4. Well Location

Unit Letter N : 450 Feet From The South Line and 2010 Feet From The West Line

Section 12

Township

25S

Range

37E

NMPM

Lea

County

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

3094' GR

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 ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: ☐

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.

Spud 12-1/4" hole 2-25-94. TD'd @ 1120'. Ran 8-5/8" 24# csg. Cmt'd w/570 sx PSL "C" + 2% cc + 1/4# cs (yld 1.89) followed by 200 sx "C" + 2% cc (yld 1.32). Circ cmt to surf. WOC 10 hrs. Est comp strength 1450#. Press test csg to 1000# for 30 mins. 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

Agent

DATE

3-11-94

TYPE OR PRINT NAME

Ken W. Gosnell

915/688-5672

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR

MAK 11 1994

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: