Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DIODDIOD I	OIL CONSERVA	\TTO	N DIVICIO)N				
OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs NM 88241-1980 2040 Pacheco St.					WELL API NO.			
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, NM 87505 a, NM 88210			5. I	30-025-32352 5. Indicate Type of Lease			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410				6. S	State Oil & Ga	STATE as Lease No.	LAU FE	EL
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 G			
1. Type of Well: OIL GAS WELL OTHER X						• • • • •		
2. Name of Operator ARCO Permian					8. Well No. 184			
3. Address of Operator P.O. Box 1089 Eunice, NM 88231					9. Pool name or Wildcat JUSTIS BLINEBRY TUBB DRKD			
4. Well Location Unit Letter 0 : 160	Feet From The	S	Line and		Feet Fro		E	Line
Section 13	Township 25S		375			LEA		_
	10. Elevation (Show	whethe			м			County //////
11. Check App	propriate Box to Indi				ort, or (Other Data	2 <i>77777777</i> 2	<u> </u>
NOTICE OF IN	SUBSEQUENT REPORT OF:							
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WOR	K		ALTERING C	ASING	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRII	LLING OPN	s. \square	PLUG AND A	BANDONME	INT
PULL OR ALTER CASING			CASING TEST A	ND CEMENT	L BOL			
OTHER:			OTHER:					🗆
12. Describe Proposed or Completed Oper work) SEE RULE 1103.	ations (Clearly state all pertin	ent deta	ils, and give pertin	ent dates, in	cluding estim	ated date of st	arting any pr	oposed
TD: 6100' PBD: 6064'	PERFS: 5088-6034*	4-1/2"	CSG @ 6100°					
MIRUPU. POH W/TBG & PKR RIH W/BIT, SCRAPER, & 2-3 SET CIBP @ 5600°. PERF ! RIH W/PPI TOOL & TBG. ACIDIZE 5003-5578° W/3050 POH W/TBG & PPI TOOLS. RIH W/GUIBERSON MODEL VI SET PKR @ APPROX 4925° F	3/8" WORKSTRING. POH. 5003-5082' (2 JSPF/52) GALS 15% HCL PKR & 2-3/8" IPC TBG	TOTAL)					
EST START DATE 10/013/97								
I hereby certify that the information above is tru	- 1	_						
SIGNATURE FULLIA S.	Muss	_ mu	Administrat	ive Assi	stant	DATE	10/07/9	7
TYPE OR PRINT NAME Kellie D. Muri	ish			-		TELEPHONE NO.	505-394-	1649
(This space for State Use) ORIGINAL	SIGNED BY						OCT 1	5 199
APPROVED BY FIELD CONDITIONS OF APPROVAL, IP ANY:	WINK PEP. II	_ TMU	E			DATE		