

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

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

WELL API NO.

30-025- 32355

5. Indicate Type of Lease

STATEXX

FEE

6. State Oil & Gas Lease No.

B-11478

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 "H"

1. Type of Well:

OIL
WELL

☒

GAS
WELL

☐

OTHER

2. Name of Operator

ARCO OIL AND GAS COMPANY

8. Well No.

232

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 A : 1275 Feet From The North Line and 150 Feet From The East Line

Section 25

Township

25S

Range

37E

NMPM

Lea

County

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

3067 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:

☐

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 2-7-94. TD'd at 1010. Ran 8-5/8 24# casing to 1010. Cmt'd w/570 sx PSL "C" + 1/4# CS + 2% CC (yld 1.89) followed by 200 sx "C" + 2% CC (yld 1.32). Circ cmt to surf. WOC 11 hrs. Est. comp strength 1200#. Press test casing to 500# for 30 minutes. 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

2-17-94

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

FEB 23 1994

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: