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State of New Mexico

Form C-103 Energy, Minerals and Natural Resources Department Revised 1-1-89 District Office OIL CONSERVATION DIVISION DISTRICT I P.O. Box 1980, Hobbs NM 88240 WELL API NO. P.O. Box 2088 30-025-32406 DISTRICT II Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE X FEE 🗔 1000 Rio Brazos Rd., Aztec. NM 87410 6. State Oil & Gas Lease No. B-228 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO $\ensuremath{\mathsf{A}}$ 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) SOUTH JUSTIS UNIT "G" I. Type of Well: GAS WELL WELL X OTHER 2. Name of Operator 8. Well No. ARCO Permian 270 3. Address of Operator 9. Pool name or Wildeat P.O.BOX 1610, MIDLAND, TX 79702 JUSTIS BLBRY-TUBB-DKRD 4. Well Location Unit Letter B 1100 Feet From The NORTH Line and 1475 Feet From The EAST Line Section 36 Township 25S Range 37E **NMPM** LEA County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3042 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. FLUG 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 09-23-94. TD @ 996. RAN 8-5/8 24# CSG TO 996. CMT'D W/400 SX PSL "C" +2% CC + 1/4# CS (YLD 1.86) FOLLOWED BY 200 SX "C"+ 2%CC (YLD 1.32). CIRC CMT TO SURF. WOC 11 3/4 HRS. EST COMP STRENGTH 1600#. PRESS TEST CSG TO 1000# FOR 30 MIN. 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. __ DATE <u>09-30-94</u> TYPE OR PRINT NAME Ken W. Gosnell TELEPHONE NO.915 688-5672 (This space for State Use)

TITLE _

__ DATE OCT 05 1994

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY ____