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LAND OFFICE	
OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

OCT 29 1974

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. OG181
7. Unit Agreement Name
8. Farm or Lease Name Empire Abo Unit C
9. Well No. 46
10. Field and Pool, or Wildcat Empire Abo
12. County Eddy

SUNDY NOTICES AND REPORTS ON WELLS, OFFICE
(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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Atlantic Richfield Company ✓

3. Address of Operator
P. O. Box 1710, Hobbs, New Mexico 88240

4. Location of Well
UNIT LETTER K, 1256 FEET FROM THE West LINE AND 2314.3 FEET FROM
THE South LINE, SECTION 30 TOWNSHIP 17S RANGE 29E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
3660' DF

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Shut in. Allowable Transferred</u> <input checked="" type="checkbox"/>

17. 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.

The above well was shut in on October 1, 1973. This well was shut-in because it is a high GOR well. Allowable transferred under NMOCC Orders R-4548, R-4549, R-4549-A, R-4549-B. Also holding for secondary recovery.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Dist. Prod. & Drlg. Supt. DATE October 31, 1974

APPROVED BY [Signature] TITLE OIL AND GAS INSPECTOR DATE NOV 22 1974

CONDITIONS OF APPROVAL, IF ANY: