

C/SZ

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐
2. NAME OF OPERATOR ARCO Oil and Gas Company
Division of Atlantic Richfield Company
3. ADDRESS OF OPERATOR
P. O. Box 1710, Hobbs, New Mexico 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 330' FNL & 660' FEL
AT TOP PROD. INTERVAL: as above
AT TOTAL DEPTH: as above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELLwaterflow <input checked="" type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other)	

5. LEASE
LC-029395--a
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME RECEIVED
8. FARM OR LEASE NAME
Turner "A" MAR 14 1983
9. WELL NO.
12
10. FIELD OR WILDCAT NAME ARTESIA OFFICE
Grayburg Jackson QGSA
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
19-17S-31E
12. COUNTY OR PARISH Eddy 13. STATE New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3675' DF

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

1. Rig up, back flow well. POH w/rods & pump. Install BOP. POH w/tbg. RIH w/bit & scraper.
2. RIH w/pkr, set pkr @ approx 2700' & check source of wtr flow. POH w/pkr.
3. If source of wtr flow is from OH 2960-3410', set cmt retr in 7" csg @ 2900', establish inj rate & squeeze cmt w/C1 H cmt cont'g 2% CaCl₂.
4. If source of wtr flow is from 2510-12', set CIBP @ 2700', test CIBP w/1000#. RIH w/cmt retr. Set retr @ 2450', establish inj rate & cmt squeeze w/C1 H cmt cont'g 2% CaCl₂. WOC 48 hrs.
5. Drill out cmt & retr, press test squeeze job. Press test 7" csg & cmt squeeze if any holes are found. CO to 3410' PBD.
6. RIH w/compl assy & return to production.

Subsurface Safety Valve: Manu. and Type

18. I hereby certify that the foregoing is true and correct

SIGNED Elizabeth S. Bush TITLE Drlg. Engr. DATE 3/10/83

APPROVED (This space for Federal or State office use) MINERALS MGMT. SERVICE ROSWELL, NEW MEXICO

APPROVED (Offg. Sgd.) PETER W. CHESTER TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

MAR 11 1983

FOR

JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side