

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 029426 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

H. E. West "B"

9. WELL NO.

22-Y

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson QGSA

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

9-17S-31E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

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 (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface

660' FSL &amp; 1990' FEL (Unit Letter O)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3871'

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Shut in ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

The above well was shut-in during the month of October, 1970. The well was shut in because it was uneconomical to produce. This well is in Keel West Waterflood which is currently being studied. Should finish study in 1 year.

RECEIVED  
OCT 29 1974  
U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

TITLE Dist. Prod. &amp; Drlg. Supt.

DATE October 31, 1974

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNLESS FURTHER APPROVED, WELL MUST  
BE PUT TO BENEFICIAL USE OR PLUGGED BY  
APRIL OCTOBER 1 1975  
\*See Instructions on Reverse SideDEC 4 - 1974  
H. L. BEEKMAN  
ACTING DISTRICT ENGINEER