

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Drawer DD
Artesia, NM 88200

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 Co.
Div of Atlantic Richfield Co. ✓

3. ADDRESS OF OPERATOR
P. O. Box 1710, Hobbs, N M 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FSL & 1990' 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 WELL	<input 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 checked="" type="checkbox"/>		<input type="checkbox"/>
(other)			

5. LEASE
LC-029426- (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
RECEIVED

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
H. E. West "B"

9. WELL NO.
22-Y

10. FIELD OR WILDCAT NAME
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

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3871' DF

RECEIVED
(NOTE: Report results of multiple completion or zone change on Form 9-331-C.)
APR 9 1982

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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.)*

P&A in the following manner:

1. Rig up, install BOP & POH w/1 jt. 2-3/8" tbg.
2. RIH w/2-3/8" tbg OE & tag CIBP @ approx 3447'. Spot 40 sx cmt 3447-3240'.
3. Circ hole w/9.5# gel mud.
4. Spot 15 sx cmt @ 700' top of salt.
5. POH w/tbg to 150' & fill 5 1/2" csg to surf w/cmt.
6. Cut off well head, install P&A marker & clean & level location for abandonment.

BOP Program Attached.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

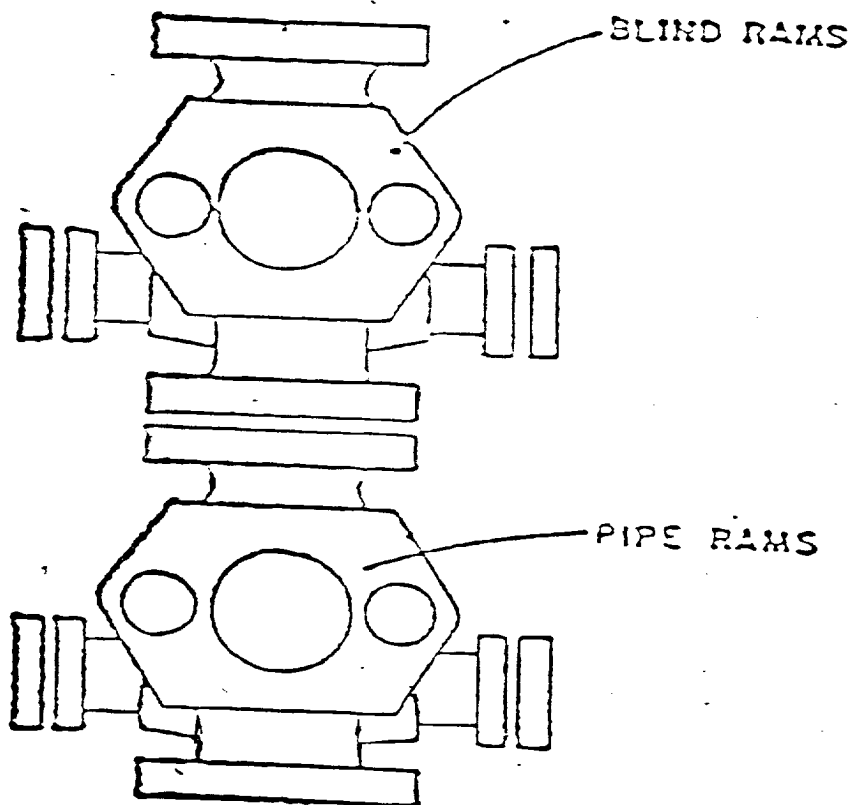
18. I hereby certify that the foregoing is true and correct

SIGNED James A. Gilliam TITLE Dist. Drlg. Supt DATE 3/16/82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE APPROVED AS AMENDED
CONDITIONS OF APPROVAL, IF ANY:

APR 12 1982
JAMES A. GILLIAM
DISTRICT SUPERVISOR



ARCO Oil & Gas Company

Division of Atlantic Richfield Company

Blow Out Preventer Program

Lease Name H. E. West "B"

Well No. 22-Y

Location 660' FSL & 1990' FEL,
Sec 9-1/2-31E, Eddy Co., N M

BOP to be tested when installed on well and will be maintained in good working condition during drilling. All wellhead fittings to be of sufficient pressure to operate in a safe manner.

John
3/16/82