

**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 Dual WIW v

2. NAME OF OPERATOR ARCO Oil & 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.) 990' FNL & 2310' FWL
AT SURFACE:
AT TOP PROD. INTERVAL:
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 checked="" type="checkbox"/> resume inj	<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* Yates only <input checked="" type="checkbox"/>	<input type="checkbox"/>
(other) <input type="checkbox"/>	<input type="checkbox"/>

5. LEASE
NM - 10190

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
East Shugart Unit Waterflood

8. FARM OR LEASE NAME
East Shugart Unit

9. WELL NO.
6

10. FIELD OR WILDCAT NAME
Shugart - Queen, Yates Shg

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
35-18S-31E

12. COUNTY OR PARISH Eddy 13. STATE New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3645' CTF

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

RECEIVED**JUL 16 1980**

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. (Clearly state all pertinent details, and give pertinent data 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.)* **O. C. D.**
ARTESIA, OFFICE

1. Rig up, install BOP, POH w/ injection tbg.
 2. Set plug in Model D pkr @ 2850', spot 3 sx sd on pkr.
 3. Run retr pkr & test for csg leaks. Run CBL/CCL/VDL fr top of sd to surf.
 4. Set cmt retr @ approx 2610'. Squeeze cmt Yates perms 2649-2817' w/ Cl C cmt w/ 2% CaCl. WOC.
 5. Perf 7" csg @ TOC as indicated by logs.
 6. RIH w/cmt retr, set above squeeze holes. Squeeze cmt w/ Cl C salt saturated cmt to surf. Close B-H valve & squeeze cmt into form. WOC.
 7. Drill out squeeze job. Press test to 1500# for 30 mins. Drill out cmt retr & Yates squeeze job to 1500# for 30 mins.
 8. Rev sd from Model D pkr plug, retrieve Model D pkr plug.
 9. RIH w/ Queen injection tbg, set in Model D pkr @ 2850'. Load 7"x2-3/8" annulus
- Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

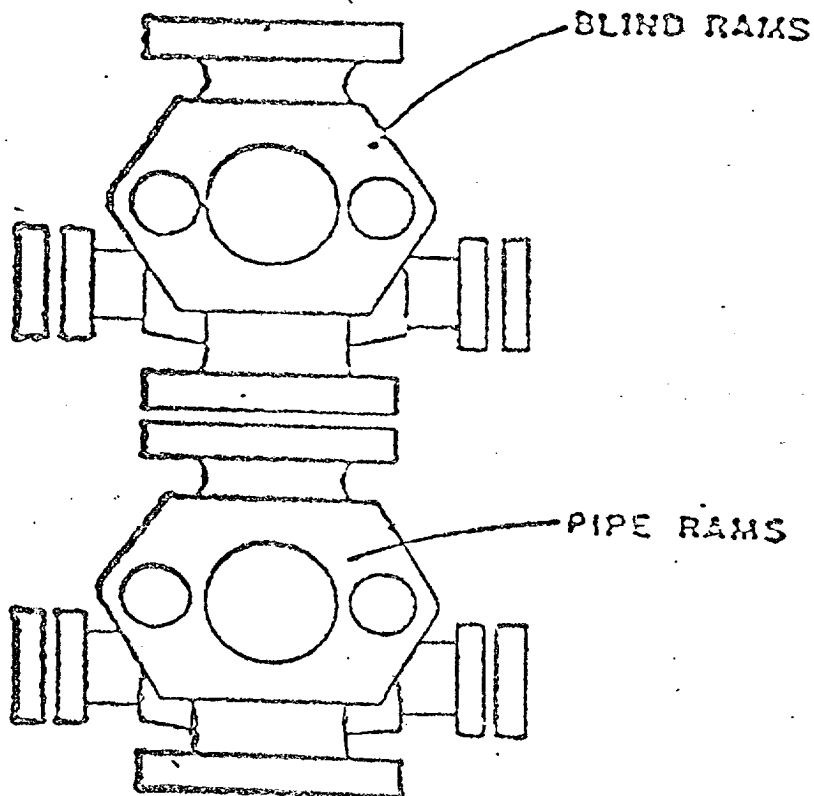
18. I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Dist. Drlg. Supt. DATE 7/11/80

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE ARTESIA, OFFICE DATE JUL 15 1980

CONDITIONS OF APPROVAL, IF ANY:



ATLANTIC RICHFIELD COMPANY
Blow Out Preventer Program

Lease Name East Shugart Unit

Well No. 6

Location 990' FNL & 2310' FWL,
Sec 35-18S-31E, Lea County, New Mexico

BOP to be tested before 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.