

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP DATE*
(Other Instruction
verse side)Form approved.
Budget Bureau No. 42-R1424.

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		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 990' FSL & 990' FWL (Unit letter M)		5. LEASE DESIGNATION AND SERIAL NO. LC 047633 (b)		6. IF INDIAN, ALLOTTEE OR TRIBE NAME		7. UNIT AGREEMENT NAME		8. FARM OR LEASE NAME Swearingen "B"		9. WELL NO. 6		10. FIELD AND POOL, OR WILDCAT East Shugart 7R Qn Grbg		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 14-18S-31E		12. COUNTY OR PARISH Eddy		13. STATE N.M.	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3702' DF		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)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.)*

On 5/19/75 rigged up. POH w/completion assy. Installed BOP. WIH w/bit & scraper to 3414'. OK. Ran pkr, tbg, set pkr @ 3338'. Trtd perfs 3397-3405' w/1000 gals 15% HCL-LSTNE w/2 gals iron stabilizer, 2 gals surfactant added. MP 3000#, Min 3000#, ISIP 2000#. Flwd & swbd 5 hrs, rec 65 BLW w/trace of oil. POH w/tbg & pkr. RIH w/2-3/8" OD tbg & SN, btm of tbg @ 3396'. Ran rods & pump. On 24 hrs potential test 5/27/75 pmpd 11 BO, 46 BW, gas not measured. Returned Queen zone 3397-3405' to production. Prior production was 3 BO & 6 BWPD.

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

SIGNED

TITLE Dist. Drlg. Supv.

DATE 5/29/75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side