

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBBS, NEW MEXICO 88240

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: 990' FSL & 660' FEL
AT TOP PROD. INTERVAL: as above
AT TOTAL DEPTH: as above

5. LEASE NO. 88240

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Mescalero Ridge Unit 35

9. WELL NO.
10

10. FIELD OR WILDCAT NAME
Pearl Seven Rivers

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
35-19S-34E

12. COUNTY OR PARISH Lea 13. STATE New Mexico

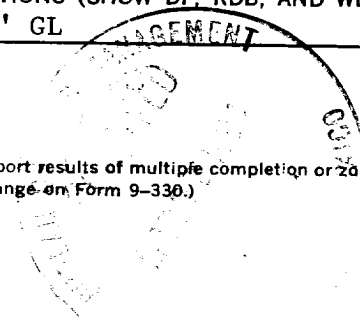
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3704' GL

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 checked="" 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 checked="" type="checkbox"/>
ABANDON* (other)	<input type="checkbox"/>		<input type="checkbox"/>

(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.)*

RU 11/21/83, installed BOP & POH w/compl assy. Set pkr @ 4040' & pmpd 75' sd, rel pkr & tagged sd @ 4976', set pkr @ 4544' & established injection rate 3 Bbls min @ 1000#. Tested tbg/csg annulus to 1000# OK. POH w/pkr & tbg. Set cmt retr @ 4544' & cmt sqzd perfs 4595-4976' w/150 sx C1 C cmt. RO 50 sx cmt. Left 10' cmt on top of retr. Queen zone abandoned eff: 11/22/83. Ran CBL, CET, CNL. Ran GST, C-0, PIC & PAL logs. On 11/29/83 perf'd Seven Rivers zone w/1 JSPF @ 3973, 85, 88, 91, 3993' w/5 .40" holes. Set pkr @ 3940' & acidized perfs 3983-93' w/1500 gals 15% NEFE acid. Swbd 23 BLW in 1 1/2 hrs. Swbd well down & POH w/pkr. RIH w/tbg & SN to 4215'. In 3 hrs swbd 7R perfs 3983-93', rec 1 BO, 57 BLW. POH w/tbg. Perf'd add'l 7R w/2 SPF @ 3878, 80, 82, 3900, 12' = 10 .40" holes. Set RBP @ 3945' & pkr @ 3852'. Swbd 3 BNO & 0 BLW in 4 swab runs. Acidized perfs 3878-3912' w/1500 gals 15% NEFE. Swbd 8 hrs rec 1 1/2 BNO & 4 1/2 BLW. POH w/pkr & RBP. RIH w/compl assy. Set btm of tbg @ 4269'. (cont'd on back of page)

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

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

SIGNED Robert E. Ballhug TITLE Drlg. Engr. DATE 3/6/84

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY GWG TITLE _____ DATE _____

CONDITIONS OF APPROVAL MAY 16 1984

Carl..., NEW MEXICO See Instructions on Reverse Side

YM

RECEIVED

MAY 18 1984

O.C.D.
HOBBS OFFICE