

NEW MEXICO OIL CONSERVATION COMMISSION

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5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Atlantic Richfield Company	8. Farm or Lease Name Seven Rivers Queen Unit
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240	9. Well No. 1 2
4. Location of Well UNIT LETTER <u>B</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>27</u> TOWNSHIP <u>22S</u> RANGE <u>36E</u> NMPM.	10. Field and Pool, or Wildcat Eunice 7R0 South
15. Elevation (Show whether DF, RT, GR, etc.) 3512' GR	12. County Lea

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

On 1/6/75 POH w/completion assy. Ran GR correlation log from 3708-3300'. Perf'd 1 JS ea @ 3688, 90, 92, 94, 3705, 07 & 09' = 7 holes. Ran 2-3/8" tbg, RBP & FBRC. Set RBP @ 3715'. Spotted 2 bbls 15% HCL-LSTNE acid 3709-3627'. Set FBRC @ 3600'. Trtd perms 3688-3709' w/2000 gals 15% HCL-LSTNE acid, flushed w/17 bbls 9# brine. MP 3800#, Min 1400#, ISIP vacuum. POH w/tbg, pkr & RBP. WIH w/tbg & pkr to 3750'. Spotted 2 1/2 bbls 15% HCL acid 3811-3721'. Trtd perms 3721-3811' w/2000 gal 15% acid. Flushed w/50 bbls 9# brine. MP 1100#, Min 400#, ISIP vacuum. POH w/tbg & pkr. Ran completion assy & put on pumping test. On 24 hr potential test 1/15/75 pumped 16 BO, 12 BW & 0 MCFG. Final Report.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED H. J. Bernard TITLE Dist. Drlg. Supv. DATE 1/21/75

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: