Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department



DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

WELL API NO.

Dierpier H	P.O. Box 2088	04 0000	30-015-03189	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 875	ECEIVED 5. India	cate Type of Lease	🗆
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	חוא	V 6 1992 6. State	STATE X	FEE
		_	E420	1
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPO	S AND REPORTS ON WELLS	TEST DESCRIPTION OF THE PROPERTY OF THE PROPER		
DIFFERENT RESERVO	NR. USE "APPLICATION FOR PERMIT"		se Name or Unit Agreement Name	•
(FORM C-10) 1. Type of Well:	I) FOR SUCH PROPOSALS.)			
OL GAS WELL	OTHER /	Emp	oire Abo Unit "B"	
2. Name of Operator		8. Well		
ARCO 011 and 3. Address of Operator	Gas Company 🗸		46	
•	0 - Hobbs, NM 88241-17	1	name or Wildcat Empire	<u>م</u>
4. Well Location				
Unit Letter F : _2310	Feet From The North	Line and1254	Feet From The West	Line
Section 30	Township 17S Range	20E	T 11	
Section 30	Township 1/S Range 10. Elevation (Show whether DF, R.	29E NMPM KB, RT, GR, etc.)	Eddy	County (7/7/7/7/7/7/7/7/7/7/7/7/7/7/7/7/7/7/7/
	3634'			
	propriate Box to Indicate Natu	re of Notice, Report, o	r Other Data	
NOTICE OF INTE	VTION TO:	SUBSEQU	ENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON REI	ÆDIAL WORK	ALTERING CASING	. [
TEMPORARILY ABANDON	CHANGE PLANS CO	MMENCE DRILLING OPNS.		_
			PLUG AND ABANDX	ONMENT L
PULL OR ALTER CASING	CAS	NG TEST AND CEMENT JO		
OTHER:	Ц отн	ER: Temporar	ily Abandōn	
 Describe Proposed or Completed Operations work) SEE RULE 1103. 	(Clearly state all pertinent details, and give	pertinent dates, including estimat	ted date of starting any proposed	
TD 6351', PBD 6294'	, Perfs 6084-6090', CIBE	6050 '		
10/27/92 Load well to 500# and	with 1 Bb1 8.6# brine wi 1 hold for 30 minutes.	th TH-377 chemica No loss of pressu	1. Pressure	
Chart Attached	Th A ba	is Approval of Ica I ndonment Expires	10/97	
			-	
I hereby certify that the information above is true and				
SIONATURE CONTINUES	mrs Op	erations Coordina	tor DATE 11-05- (505)	-92
TYPE DESTINAME James D. Cos	burn		TELEPHONE NO. 39	1-1600
(This space for State Use))				
John S	· .	400 B	.1 1	
APTROVED BY		XX KOR	DATE 11/10/92	2

CONDITIONS OF APPROVAL, IF ANY:

