

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

DATE
a re

Form approved.
Budget Bureau No. 1004-0035
Expires August 31, 1985

215F

5. LEASE DESIGNATION AND SERIAL NO.

LC 029435 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

J. L. Keel "B"

9. WELL NO.

19

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson-SF-25-F

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

5-17S-31E

12. COUNTY OR PARISH 13. STATE

Eddy

N.M.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

ARCO Oil and Gas Company - Div. of 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

1980' FSL & 1980' FEL

RECEIVED BY

APR 7 1986

O. C. D.

ARTESIA, OFFICE

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3868' GR

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* ☐

Shut In ☒

(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.) *

Pulled rods & pump. Loaded hole w/corrosion inhibited oil. Well shut down effective April 4, 1986 pending engineering evaluation.

APPROVED FOR 12 MONTH PERIOD
ENDING 4/4/87

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

SIGNED

J. W. King

TITLE

Area Prod. Supt.

DATE

4/04/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

4-4-86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side