

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN THE MANNER  
(Other instructions on re-  
verse side)Form approved  
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

LC 029548 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C. A. Russell

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson QGSA

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

18-T17S-R31E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

1. OIL ☒ GAS ☐ OTHER ☐  
WELL WELL

RECEIVED

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

ARTESIA, OFFICE

1650' FNL &amp; 1650' FEL (Unit letter G)

14. PERMIT NO.

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

3723' 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) Shut-in ☒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.) \*

The above well was shut-in during the month of February, 1971. The well was shut in because of junk in the hole. A workover has been approved as this well is a part of the Russell-Turner Waterflood Project. Work to begin within next 6 months.

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

SIGNED

TITLE Dist. Prod. &amp; Drlg. Supt.

DATE October 31, 1974

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNLESS FURTHER APPROVED, WELL MUST  
BE PUT TO REST OR PLUGGED BY IT

OCT 1 - 1975

\*See Instructions on Reverse Side