

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

## 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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Injection Well	5. LEASE DESIGNATION AND SERIAL NO. LC 029395(a)
2. NAME OF OPERATOR Atlantic Richfield Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 1978, Roswell, New Mexico 88201	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650' FNL, 1980' FWL (Unit Letter F)	8. FARM OR LEASE NAME Turner "A"
14. PERMIT NO.	9. WELL NO. 15
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3658' Grd.	10. FIELD AND POOL, OR WILDCAT Grayburg-Jackson
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 19, T17S, R31E
	12. COUNTY OR PARISH Eddy
	13. STATE N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Run 4 1/2" Innerstring <input checked="" type="checkbox"/>	
(Other)		(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.)\*

MI & RU unit 1/2/70. Cleaned out fill from 3435-3442' (T.D.). Ran 112 jts 4 1/2" OD 8R 9.5# Midco-50 ST&C csg w/guide shoe & float collar = 3443', set @ 3442' GL. Cemented w/200 sx Class "C" cmt containing 5# salt/sk, 5# gilsonite/sk, 1/4# Flocele/sk & 1% CaCl. Plug down @ 3:00 PM 1/4/70. WOC. Temperature survey indicated top of cement @ 1100'. After 24 hrs WOC drld float collar & cement 3409-3437' (PBD). Perf'd Jackson formation @ 3321, 3327, 3331, 3335, 3339, 3346, 3349, 3353, 3355, 3359, 3370, 3373, 3379, 3385, 3387, 3396, 3402, 3406, 3417, 3426 & 3432 w/one 0.42" JS ea (21 holes). Ran 4 1/2" Johnston 101-S PC tension pkr & 104 jts of 2-3/8" OD 4.7# 8R J-55 tbg = 3246.89', bottomed @ 3242.89' w/15,000# tension on pkr. Trtd perfs 3321-3432 w/3000 gallons 15% HCl LSTNE acid & ball sealers. Swabbed back load, returned well to water injection. Job complete 1/7/70.

RECEIVED

JAN 16 1970

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

SIGNED

*D. D. Dretcher*

TITLE

Dist. Drlg. Supervisor

DATE

1-14-70

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD PURPOSES  
JAN 15 1970

Date

ACTING

District Engineer

\*See Instructions on Reverse Side