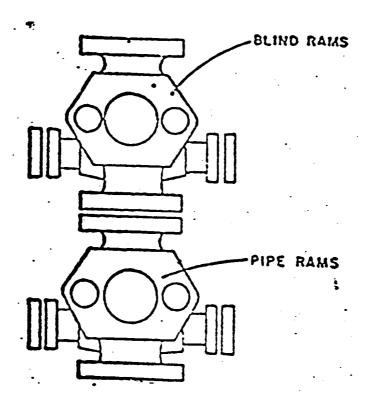
U'TED STATES SUBMIT IN TRI DEPARTME... OF THE INTERIOR (Other instruction verse side)

Form approved.

Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

GEOLOGICAL SURVEY			LC 031844	LC 031844	
SUNDRY NO	6. IF INDIAN, ALLOTTEE OR TE	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
- -		plug back to a different reservoir.	FD		
i.	ICATION FOR PERMIT— 10F	such proposats) E L. E I V	7. UNIT AGREEMENT NAME		
OIL X GAS OTHER					
2. NAME OF OPERATOR		MAR 2 19	76 8. FARM OR LEASE NAME		
Atlantic Richfield Company			Fren Oil Compan	У	
3. ADDRESS OF OPERATOR		(I. C. C.	9. WELL NO.		
P. O. Box 1710, Hobbs	s, New Mexico 8824	O ARTESIA, OFF	1CE 8		
4. LOCATION OF WELL (Report location See also space 17 below.)	n clearly and in accordance wi	th any State requirements	10. FIELD AND POOL, OR WILD	CAT	
4. LOCATION OF WELL (Report locatio See also space 17 below.) At surface		BECEL	Grayburg Jackson		
2310' FWL & 2310' FS		JAN 1 6 1976	11. SEC., T., E., M., OR BLK. AN SURVEY OR AREA	ı D	
2310 FWL & 2310 FS		JANIO	19-17S-31E		
14. PERMIT NO.	15. ELEVATIONS (Show who	CIIKA	12. COUNTY OR PARISH 13.	STATE	
	3613	DE U. S. GEOLD NEW MEXIC	Eddy N	.M.	
16. Chad.	A D 7 1 1	DF U. S. GEOLOGICAL SEXIC	1: 2009 1		
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data					
NOTICE OF IN	TENTION TO:	_	SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL		
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMEN	T ALTERING CASING		
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZE	ING ABANDONMENT®		
(Other) Dlane C Ale and	CHANGE PLANS	(Other)(Note: Report	results of multiple completion on We	 11	
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 perti-					
nent to this work.) *					
TD 3615'. Present perfs are 2755-2841, 2882-3562' in the Grayburg SA. This well is					
depleted and is uneconomical to produce. The well is not needed for secondary recovery operations.					
8-5/8" OD 24# csg set @ 505' & cmtd w/75 sx.					
7" OD 20# csg set @ 1792' & cmtd w/15 sx 10# mud & 130 sx cmt.					
43" OD 9.5# csg set @ 3578' & cmtd w/465 sx.					
Propose to plug & abandon this well in the following manner:					
1. Rig up, install BOP & POH w/completion assy.					
2. RIH w/CIBP & set @ 2710'. Spot 35' C1 C cmt cont'g 4% gel on top of BP. Fill hole					
w/heavy gelled mud.					
3. Run free pt on $4\frac{1}{2}$ csg. If $4\frac{1}{2}$ csg stretch indicates free pt @ 1900' or below, perf $4\frac{1}{2}$ csg w/4 holes @ 1850'.					
45 Csg w/4 holes @ 1850 . 4. RIH w/45" cmt retr, set @ 1740' & squeeze cmt perfs @ 1850' w/50 sx Cl C cmt cont'g					
4% gel.					
5. Cut 4½" csg @ TOC	, pull & recover.			•	
6. Perforate 7" @ 605'. RIH w/7" cmt retr set @ 400'.					
7. Circulate Cl C cmt cont'g 4% gel (amt to be determined) thru perfs @ 605' to surface.					
If circulation is not established, then squeeze cmt perfs @ 605'.					
8. If no circulation is established in 7" X 8-5/8" csg annulus, then perforate 7" csg @ 100' w/4 holes & cmt squeeze thru perfs to surface.					
		eris to surface. clean & level locat:	÷		
. install regulation	n dry noie marker,	cream & rever locat.	ion.		
18. I hereby certify that the foregoin	g is true and correct				
SIGNED	TITLI	Dist. Drlg. Su	DATE	<u> </u>	
(This space for Federal or State	office use)				
APPROVED BY	TITL	PC	DATE		
CONDITIONS OF APPROVAL, IF ANY:					
*See Instructions on Reverse Side					
1 Bill	*See Instructions on Reverse Side				
<i># 11</i>		•			
y					



ATLANTIC RICHFIELD COMPANY Blow Out Preventer Program

Lease Name	Fren Oil Company
Well No	8
Location	2310' FWL & 2310' FSL
<u></u>	Sec 19 175 31F Eddy Co

BOP to be tested before installed on well and will be maintained in good working condition during drilling. All wellhead fittings to be of sufficient pressure to operate in a safe manner.