REPAIR WELL (Other)

	13g M. U. 12,	the box to		10 10
Porm 9-231 (May 1963) DE	"ITED STATES PART!NT OF THE INTER GEOLOGICAL SURVEY	SUBMIT IN T ACATE (Other instruct, so on re-		au No. 42-R1424.
SUNDRY (Do not use this form to Use	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
OIL GAS OTHER			7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR . WAR 2 - 1972			8. FARM OR LEASE NAME	
Atlantic Richfield Company			Friess Federal	
3. ADDRESS OF OPERATOR			9. WELL NO.	
from the East Line (Unit Letter J)			19-17S-31E NMPM	
14. PERMIT NO.	15. ELEVATIONS (Show whether D	15. ELEVATIONS (Show whether DF, RT, GR, etc.)		H 13. STATE
	3603' GI	3603' GR		N. Mex.
	neck Appropriate Box To Indicate I		9 <u>3</u> 5 1	
NOTICE	OF INTENTION TO:	SUBSE	QUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING	WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING C	CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONME	ENT*

(Other) Change in cuper & oner.

(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.)\*

Effective March 1, 1972, Atlantic Richfield Company became This well is presently owner and operator of the above well. in a producing status.

respective to the second (Formerly owned & operated by Kennedy Oil Co., Inc. Box 151 4 Artesia, New Mexico) 18. I hereby certify that the foregoing is true and correct TITLE Sr. Acctg. Clerk DATE State of Table 1 or Salar State of Control of Salar State of Salar State of Salar State of Salar (This space for Federal or State office use) CONDITIONS OF APPROVAL, IF ANY: 

\*See Instructions on Reverse Side