U TED STATES DEPARTMENT OF THE INTERIOR (Other instructiverse side)

CATE*

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

GEOLOGICAL SURVEY

LC 029395 (b) 6. IF INDIAN, ALLOTTEE OR TRIBE NAME

CHAIDDY	NOTICES	AND	REPORTS	ON	WELLS
SUNDKI	NOILES	ANU	KEL OK13	\bigcirc 11	** FFF7

(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.)

OIL GAS WELL	OTHER	RECEIVED	7. UNIT AGREEMENT NAME
Atlantic Richfiel	d Company	OCT 2 0 1975	8. FARM OR LEASE NAME Turner "B"
ADDRESS OF OPERATOR	00	olio — —	9. WELL NO. 17 10. FIELD AND POOL, OR WILDCAT
4. LOCATION OF WELL (Report See also space 17 below.) At surface	location clearly and in accordance	ARTESIA, OFFICE	Fren Seven Rivers 11. sac, T., R., M., OR BLK. AND
1980' FLS & 1980'	FWL (Unit Letter K)		SURVEY OR AREA
14. PERMIT NO.	15. BLEVATIONS (Show 3662.2	whether DF, ET, GE, etc.)	12. COUNTY OR PARISH 13. STATE
		ndicate Nature of Notice, Report, or	

,	and a ships after a con-				411	
NOTICE	OF INTENTION TO:	1	息订路相	EQUENT REPORT	OF :	
TEST WATER SHUT-OFF	PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELL	_
FRACTURE TREAT	MULTIPLE COMPLETE		PRACTURE TREATMENT		ALTERING CASING ABANDONMENT	
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING (Other) Shut-in		ABANDONMENT	X
REPAIR WELL	CHANGE PLANS	•	(Monny Panart Page	ults of multiple	completion on Wel	i
(Other)	ETED OPERATIONS (Clearly state a	all pertinent	Completion or Reco			arting

miss recursion on Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any oposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertime to this work.)*

The above well was shut-in during the month of February, 1970. The well was shut-in because it was uneconomical to produce. This well is under study for waterflood. Will hold for NMOCC hearing during the 4th qtr of 1975.

RECEIVED AND DEAD OF BURNERS OF THE STATE OF

18. I hereby certify that the foregoing is true and correct SIGNED	TITLE Dist Prod & Drlg S	Supt DATE 9-29-75
(This space for Federal or State office use)		
· · · · · · · · · · · · · · · · · · ·	COLLEGE IN	DATE

SOEAP OVAL, IF ANY: R. L. BEEKMAIN ACTING DISTRICT ENGINEER

UNLESS FURTHER APPROVED. WELL HUBI UNLESS FURTHER APPROVED. WELL

BE PUT TO BENEFICAL USE OR PLUGGED BY

BE PUT TO BENEFICAL OCTOBERS. OCT. 1 - 1976

APRIL OCTOBERS. Instructions on Reverse Side