

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

- 1. oil well  gas well  other
- 2. NAME OF OPERATOR ARCO Oil and Gas Company  
Division of Atlantic Richfield Company
- 3. ADDRESS OF OPERATOR  
P. O. Box 1710, Hobbs, New Mexico 88240
- 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660' FSL & 660' FEL (Unit Ltr "P")  
AT TOP PROD. INTERVAL: as above  
AT TOTAL DEPTH: as above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

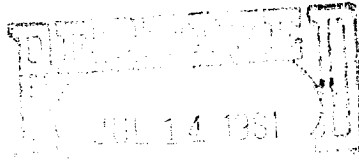
- |                                 |                          |                       |                          |
|---------------------------------|--------------------------|-----------------------|--------------------------|
| REQUEST FOR APPROVAL TO:        |                          | SUBSEQUENT REPORT OF: |                          |
| TEST WATER SHUT-OFF             | <input type="checkbox"/> |                       | <input type="checkbox"/> |
| FRACTURE TREAT                  | <input type="checkbox"/> |                       | <input type="checkbox"/> |
| SHOOT OR ACIDIZE                | <input type="checkbox"/> |                       | <input type="checkbox"/> |
| REPAIR WELL                     | <input type="checkbox"/> |                       | <input type="checkbox"/> |
| PULL OR ALTER CASING            | <input type="checkbox"/> |                       | <input type="checkbox"/> |
| MULTIPLE COMPLETE               | <input type="checkbox"/> |                       | <input type="checkbox"/> |
| CHANGE ZONES                    | <input type="checkbox"/> |                       | <input type="checkbox"/> |
| ABANDON*                        | <input type="checkbox"/> |                       | <input type="checkbox"/> |
| (other) Log, run prod csg & cmt |                          |                       |                          |

- 5. LEASE  
LC-034117 (a)
- 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
- 7. UNIT AGREEMENT NAME
- 8. FARM OR LEASE NAME  
R. S. Crosby "A"
- 9. WELL NO.  
4
- 10. FIELD OR WILDCAT NAME  
Langlie Mattix 7R On
- 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
29-25S-37E
- 12. COUNTY OR PARISH  
Lea
- 13. STATE  
N M
- 14. API NO.
- 15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3024.5' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

Fin drlg 7-7/8" hole to 3419' TD @ 7:00 PM, 6/26/81. Ran CDL/CNS GR w/Caliper, GR DLL. RIH w/5 1/2" OD 15.5# K-55 csg set @ 3419'. DV tool set @ 2525'. Cmtd 5 1/2" csg 1st stage w/180 sx Cl H cmt cont'g 3#/sk salt, 1/4#/sk flocele, circ 20 sx cmt thru DV tool. Cmtd 2nd stage thru DV tool @ 2525' w/750 sx HOWCO Lite Cmt cont'g 15#/sk salt, 1/4#/sk flocele. PD @ 9:00 AM, 6/28/81. Circ 90 sx cmt to surf. WOC.



Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Jerry D. Schmidt TITLE Dist. Drlg. Supt. DATE 7/09/81

ACCEPTED FOR RECORD (This space for Federal or State office use)  
ROGER A. CHAPMAN

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

JUL 15 1981  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

\*See Instructions on Reverse Side