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**RECEIVED**  
NEW MEXICO OIL CONSERVATION COMMISSION  
FEB 3 1977

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

**D. C. C.**  
DISTRICT OFFICE

|   |                              |
|---|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| 647                                       |                              |

**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" (FORM C-101) FOR SUCH PROPOSALS.)

|  |  |   |
|--|--|---|
| 1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Gas Injection Well  |  | 7. Unit Agreement Name<br>Empire Abo Pressure Maintenance Project |
| 2. Name of Operator<br>Atlantic Richfield Company  |  | 8. Farm or Lease Name<br>Empire Abo Unit "D"                      |
| 3. Address of Operator<br>P. O. Box 1710, Hobbs, New Mexico 88240  |  | 9. Well No.<br>37   |
| 4. Location of Well<br>UNIT LETTER <u>M</u> <u>500</u> FEET FROM THE <u>South</u> LINE AND <u>820</u> FEET FROM<br>THE <u>West</u> LINE, SECTION <u>26</u> TOWNSHIP <u>17S</u> RANGE <u>28E</u> N.M.P.M. |  | 10. Field and Pool, or Wildcat<br>Empire Abo                      |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3694' DF  |  | 11. County<br>Eddy  |

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

|  |   |  |   |
|--|---|--|---|
| NOTICE OF INTENTION TO:                        |   | SUBSEQUENT REPORT OF:                                |   |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input checked="" type="checkbox"/>    | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <input type="checkbox"/>                |

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Rigged up on 1/19/77, killed well, installed BOP & POH w/gas injection assy. Drld out cmt & retri 6065-6122'. PBD 6154'. Perf'd Abo 6080-6122' w/1 JSPF (42 - .41"holes). RIH w/Lok-set pkr on 2-3/8" plastic lined tbg, set pkr @ 5911', btm tbg @ 5920'. Trtd perfs 6030-6122' w/ 5000 gals xylene-15% HCL mixed w/50:50 acid followed by 12 BLO. MP 3900#, Min 0#, ISIP 400#, immed vac. 14 hr SITP vac, CP 0#. Swbd Abo 6030-6122' 4 hrs, rec 12 BLO, 5 BNO & 34 BLW. Hooked up for gas injection. Gas injection rate 9.4 MMCFPD @ 1600# PSIG. Returned well to gas injection on 1/27/77.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Dist. Drlg. Supt. DATE 2/2/77

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE FEB 4 1977

CONDITIONS OF APPROVAL, IF ANY: