

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

AUG 16 '90

WELL API NO. 30-015-01644
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. 647
7. Lease Name or Unit Agreement Name Empire Abo Unit "G"
8. Well No. 24
9. Pool name or Wildcat Empire Abo

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. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Gas Injection	
2. Name of Operator ARCO OIL AND GAS COMPANY ✓	
3. Address of Operator P. O. Box 1610, Midland, Texas 79702	
4. Well Location Unit Letter <u>I</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u> Line Section <u>31</u> Township <u>17S</u> Range <u>28E</u> NMPM <u>Eddy</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3691' DF	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: <u>Recomplete Abo</u> ☒	

12. 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.

8-02-90. RUPU. POH w/CA. Set CR at 5782. Sqz'd Abo perms 5862-86 w/150 sx cmt. DO CR & cmt to 5890. Press test to 700#. DO CR & cmt f/5960-6068. Press test csg to 700#. Perf Abo f/6024-6050. Acidize w/4000 gals. RIH w/CA: 2 3/8 tbq & pkr to 5780. Load csg w/pkr fluid. Press test annulus to 500#.

8-10-90. In 24 hrs injected 4.2 MMCF, 1900# TP, 0# surface csg press, 0# csg annulus, 48/64 ck.

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

SIGNATURE Ken W. Gosnell TITLE Engr. Tech. DATE 8-14-90

TYPE OR PRINT NAME Ken W. Gosnell 915/688-5672 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ DATE AUG 20 1990

CONDITIONS OF APPROVAL, IF ANY: