F	7		
NO. OF COPIES RECEIVED	RECEIVED		Form C-103
DISTRIBUTION	_		Supersedes Old C-102 and C-103
SANTA FE		ERVATION COMMISSION	Effective 1-1-65
FILE	_ F	EB 1 3 1973	
U.S.G.S.		- > 15/5	5a. Indicate Type of Lease
LAND OFFICE			State X Fee
OPERATOR		O. C. C.	5. State Oil & Gas Lease No.
	ARTESIA, OFFICE		647
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR FLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			
1. OIL GAS OTHER-			7. Unit Agreement Name
2. Name of Operator			8. Farm or Lease Name
Atlantic Richfield Company			M. Yates "B" ARC
3. Address of Operator			9. Well No.
P. O. Box 1978, Roswell, New Mexico 88201			6
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER N 660 FEET FROM THE South LINE AND 1980 FEET FROM			Empire-Abo
UNIT LETTER FEET FROM THE LINE AND FEET FROM			
West	33 17-	S 28-E	
THE West LINE, SECTION TOWNSHIP RANGE NMPM.			«`\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
15. Elevation (Show whether DF, RT, GR, etc.) 3668 'GR			12. County Eddy
^{16.} Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:			
Notice of it	ATENTION TO:	JUBSEQUE	TREFORT OF.
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	
TEMPORARILY ABANDON	•	COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		OTHER	[]
OTHER		VIALN	

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 1703.

Squeeze cemented perfs 6202-6222' w/40 sx cement. Reversed out 35 sx. JC @ 11:10 AM 1/17/73. Perforated w/1/2" JSPF from 6169-6182'. Treated perfs 6169-6182' w/500 gal 15% HCl LSTNE acid. Swbd and flwd back load. Opened to test tank on 32/64" chk, well failed to flow. Treated Abo perfs 6169-6182' w/1000 gallons 15% HCl-LSTNE acid. Swabbed well in. On 24 hr flow test 1/31/73, thru 22/64" chk, FTP 125#, recovered 155 BO & 52 BW, GOR 690/1.

Prior to workover well flowed 150 BOPD + 65% water and it was necessary to swab daily to maintain flow.

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

Dist. Drlq. Supervisor 2/7/73 WAR GLA HELPHOYAN

CONDITIONS OF APPROVAL, IF ANY