

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

WELL API NO. 30-015-01735
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 647
7. Lease Name or Unit Agreement Name EMPIRE ABO UNIT "E"
8. Well No. 39
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator ARCO OIL AND GAS COMPANY
3. Address of Operator BOX 1710, HOBBS, NEW MEXICO 88240	4. Well Location Unit Letter <u>B</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line Section <u>35</u> Township <u>17S</u> Range <u>28E</u> NMPM <u>EDDY</u> County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3579' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: TEMPORARILY ABANDON ☒ RECEIVED

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.

TA AND HOLD WELL BORE FOR FIELD BLOW DOWN

TD 6350', PBD 6324', Perfs: 6210-6230'

6/10/90 MIRU DDPNU BOP. Unset pkr. RIH w/9 jts tbg. Tag POH w/pkr and tbg. RIH w/CIBP. SDON.

6/11/90 R.O. Set CIBP RU Kill truck. Circulate well w/100 BBLS 8.6# brine w/WT-675 chemical. Close in well. Pressure up to 500 psi. Held for 15 mins. Made chart for state. POH w/tbg and CIBP, running tool. Lay down tbg in singles RDCL. CIBP set @ 6150.41'.

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

SIGNATURE [Signature] TITLE Administrative Supervisor DATE 7/13/90
TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY GW 7-17-90 TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

