

NO. OF COPIES RECEIVED	3
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION

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

SUNDARY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR OPERATIONS TO DRILL OR TO REPER OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT TO DRILL OR TO REPER OR PLUG BACK TO A DIFFERENT RESERVOIR.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator Atlantic Richfield Company

3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240

4. Location of Well
UNIT LETTER E 1850 FEET FROM THE North LINE AND 710 FEET FROM
THE West LINE, SECTION 35 TOWNSHIP 17S RANGE 28E NMPM.

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
B-11593

7. Unit Agreement Name
Empire Abo Pressure Maintenance Project

8. Name of Lease Holder
Empire Abo Unit "F"

9. Well No.
37

10. Field and Pool, or Valued
Empire Abo

12. County
Eddy

15. Elevation (Show whether DF, RT, GR, etc.)
3687' DF

16. 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 ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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.

Propose to blank off present Abo perfs 6266-94' & perforate Abo higher in reef in the following manner:

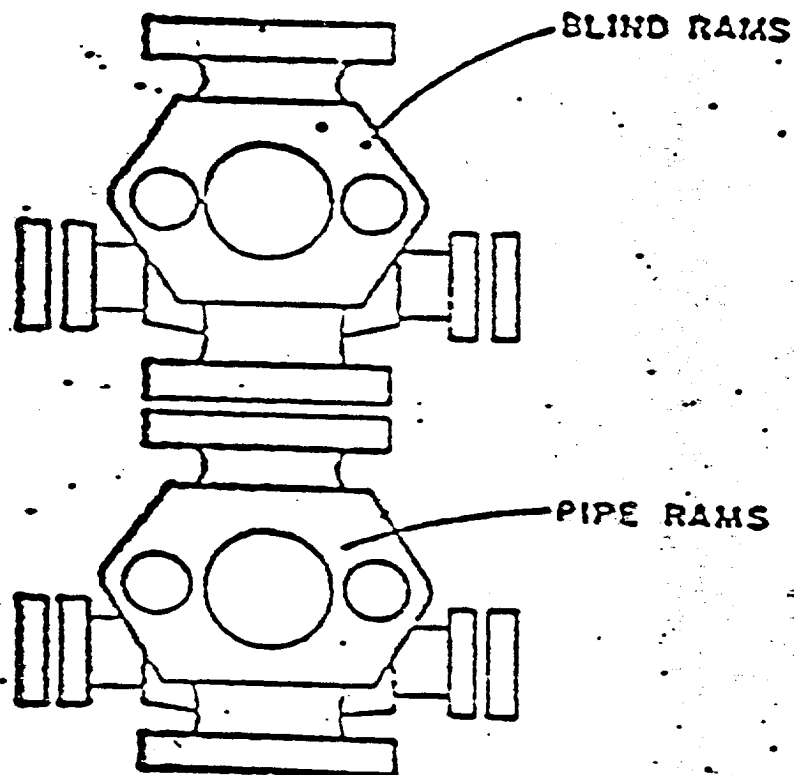
1. Rig up, kill well, install BOP & POH w/compl assy.
2. Drill out Model D pkr @ 6246'.
3. Run GR-Corr log PBD 6312' to top of reef.
4. Set CIBP @ 6260' & cap w/cmt.
5. Perforate Abo 6220-40' w/2 JSPF.
6. RIH w/pkr on 2-3/8" tbg, set pkr @ 6175'.
7. Acidize Abo perfs 6220-40' w/300 gals 15% HCL, 500 gals 10# CaCl wtr, 500 gal LC, 2000 gals 60/40 DAD, flush w/18 BLC. Swab test & return to production.

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 11/3/77

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE NOV 10 1977

CONDITIONS OF APPROVAL, IF ANY:



ATLANTIC RICHFIELD COMPANY
Blow Out Preventer Program

Lease Name Empire Abo Unit "F"

Well No. 37

Location 1850' FNL & 710' FWL
Sec 35-17S-28E, Eddy County

BOP to be tested before installed on well and will be maintained in good working condition during drilling. All wellhead fittings to be of sufficient pressure to operate in a safe manner.