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NEW MEXICO OIL CONSERVATION COMMISSION

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AUG 6 1975

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

SUNDRY NOTICES AND REPORTS ON WELLS
DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK INTO A FRESH WATER RESERVOIR.
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. 647
7. Unit Agreement Name
8. Farm or Lease Name Empire Abo Unit "H"
9. Well No. 261
10. Field and Pool, or Wildcat Empire Abo
12. County Eddy

WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator

Atlantic Richfield Company

3. Address of Operator

P. O. Box 1710, Hobbs, New Mexico 88240

4. Location of Well

UNIT LETTER N 1400 FEET FROM THE West LINE AND 150 FEET FROM
THE South LINE, SECTION 32 TOWNSHIP 17S RANGE 28E NMPM.

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

3668.6' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER Perforating, acidizing & completing ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

On 7/25/75 perf'd Abo formation 6154-6164' w/20 holes. Ran 5 1/2" Lok-set pkr, off & on tool w/1.81" profile trim, and 2-3/8" OD EUE tbg, set pkr @ 6064'. Installed well head. Acidized perfs 6154-64' w/3000 gals CR HCL-LSTNE acid, MP 3200#, Min 2750#, ISIP 2250#, 5 min SIP 1000#, 10 min SIP 400#, 15 min SIP 250#, 19 min vac. Swbd & flwd 7 hrs, rec 24 BLO & 46 BNO & 32 BLW. Flowed 20 hrs on 32/64" ck, 100# TP, rec 239 BNO & 5 BLW. On 24 hr potential test 7/30/75 flowed Abo perfs 6154-6164', 271 BO, 0 BW, 188 MCFG on 36/64" ck, FTP 100#. GOR 694:1. Final Report.

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

SIGNED [Signature]

TITLE Dist. Drlg. Supv.

8/1/75

APPROVED BY W.A. Gressett

TITLE SUPERVISOR, DISTRICT II

DATE AUG 26 1975

CONDITIONS OF APPROVAL, IF ANY: