Submit 3 Copies to Appropriate District Office	State of New M Energy, Minerals and Natural			Form C-103 Revised 1-1-89
<u>DISTRICT I</u> P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATI			
DISTRICT II	2040 Pacheco Santa Fe, NM		WELL API NO. 30-015-21806	5
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III			5. Indicate Type of Lease STATI	EX FEE
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. B-11593	
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.)			7. Lease Name or Unit Agreen	nent Name
1. Type of Well:			EMPIRE ABO UNIT "F"	
WELL X GAS WELL	OTHER			
2. Name of Operator		*	8. Well No.	
ARCO Permian 3. Address of Operator		- 14.5 To	371	
P.O. Box 1089 Eunice, NM	88231	PECEIVED	9. Pool name or Wildcat EMPIRE ABO	
4. Well Location		ARTESIA		
Unit Letter F : 222	O Feet From The N	Line and25	Feet From The	Line
Section 35	Township 17S R	ange 28E	FDDV	
		er DF, RKB, RT, GR, etc	NMPM EDDY	County
11. Check Ar	<u> </u>	3672.9' GR		
MOTIOE OF I	opropriate Box to Indicate			
NOTICE OF INTENTION TO: SUBS			SEQUENT REPOR	RT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING O	CASING [
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	[ABANDONMENT [
PULL OR ALTER CASING		CASING TEST AND CEN		ADVIADOIAIMEM .
OTHER:		OTHER: MIT		
				
12. Describe Proposed or Completed Operwork) SEE RULE 1103.	rations (Clearly state all pertinent det	ails, and give pertinent date	es, including estimated date of st	arting any proposed
, === 333 22 1135.				
TD: 6400' PBD: 5958' PER	FS: 5990-6004' CIBP: 6024'			
02/0/00. CCC MIT LITTIES	ED DV 4/511 1 5145110			
WHITMIRE - ARCO. PRESS T	ED BY KEN LIVINGSTON - NMOC ESTED TO 540#, HELD 15 MINS	CD, AND KENT S. HELD OK. CHART		
MINORED				
• • • • • • • • • • • • • • • • • • •				
Abandonment Expires	mpulary			
	2003			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE DULLE H.	Muss m	E Administrative As	ssistant DATE	02/20/98
	,			

TYPE OR PRINT NAME Kellie D. Murrish

TELEPHONE NO. 505-394-1649

THE Administrative Assistant

DATE 02/20/98

TELEPHONE NO. 505-394-1649

TELEPHONE NO. 505-394-1649

APPROVED BY DATE 3-2-98

CONDITIONS OF APPROVAL IF ANY: