

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	/
FILE	/
U.S.G.S.	3
LAND OFFICE	/
OPERATOR	/

# NEW MEXICO OIL CONSERVATION COMMISSION

30-015-22417

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	
647	

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
		Empire Abo Pressure Maintenance Project	
b. Type of Well		8. Farm or Lease Name	
DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		Empire Abo Unit "H"	
OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		9. Well No.	
2. Name of Operator		321	
Atlantic Richfield Company		10. Field and Pool, or Wildcat	
3. Address of Operator		X Empire Abo	
P. O. Box 1710, Hobbs, New Mexico 88240			
4. Location of Well		12. County	
UNIT LETTER P LOCATED 1050 FEET FROM THE South LINE		Eddy	
AND 250 FEET FROM THE East LINE OF SEC. 33 TWP. 17S RGE. 28E NMPM			
		19. Proposed Depth	
		6370'	
		19A. Formation	
		Abo Reef	
		20. Rotary or C.T.	
		Rotary	
21. Elevations (Show whether DF, RT, etc.)		21B. Drilling Contractor	
3662.4' GR		Not selected	
21A. Kind & Status Plug. Bond		22. Approx. Date Work will start	
GCA #8		3/1/78	

23.

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8-5/8" OD	24# K-55	600'	275	Circ to surf
7-7/8"	5-1/2" OD	14 & 15.5# K-55	6370'	1725	Circ to surf

Propose to drill an infill development well within the Empire Abo Unit area to more economically recover additional oil reserves and conserve reservoir pressure in accordance with Unit OCC Rules & Regulations (NSL-915),

Blowout Preventer Program attached

RECEIVED

FEB 6 1978

O. C. C.  
ARTESIA, OFFICE

APPROVAL FOR SO. DIST. II  
DRILLING COMMENCED,

EXPIRES 5-8-78

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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 2/2/78

(This space for State Use)

APPROVED BY W. A. Grasset TITLE SUPERVISOR, DISTRICT II DATE FEB - 8 1978

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section

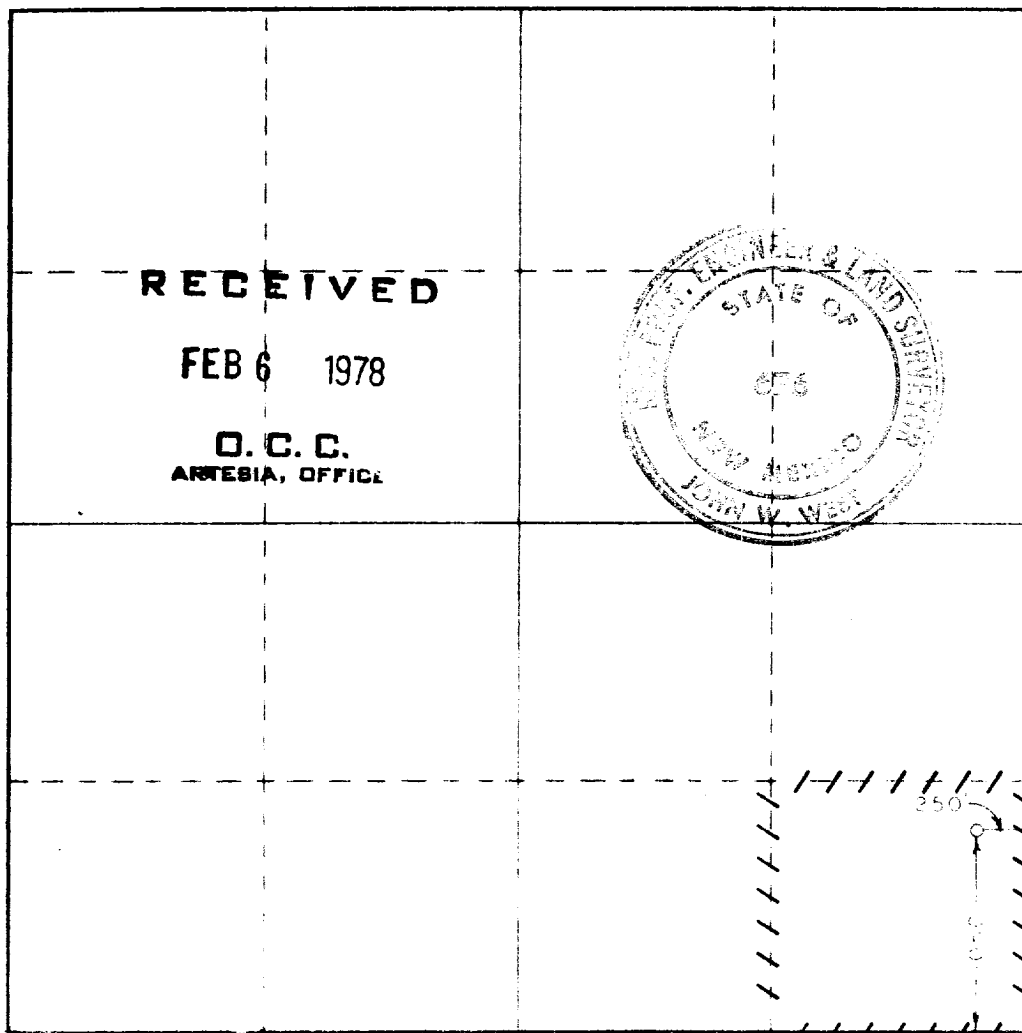
Operator <b>Atlantic Richfield Co.</b>			Lease <b>Empire Abo Unit - H</b>		Well No. <b>321</b>
Unit Letter <b>P</b>	Section <b>33</b>	Township <b>17 South</b>	Range <b>28 East</b>	County <b>Eddy</b>	
Actual Footage Location of Well: <b>1050</b> feet from the <b>South</b> line and <b>250</b> feet from the <b>East</b> line					
Ground Level Elev. <b>3662.4</b>	Producing Formation <b>Abo Reef</b>		Pool <b>Empire Abo</b>	Dedicated Acreage <b>40</b>	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation **Unitization**

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

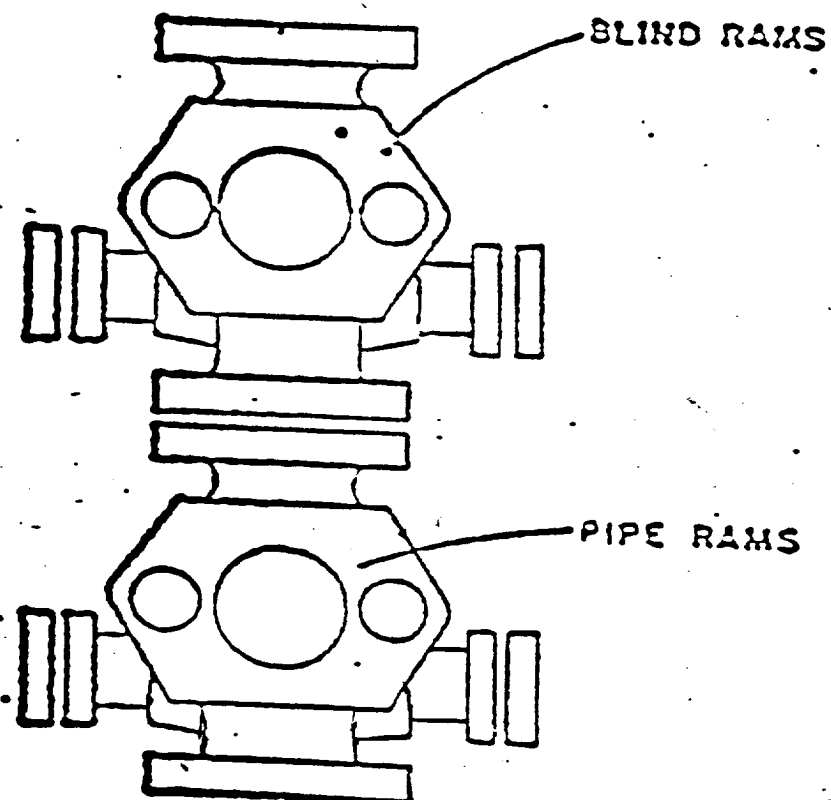
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

Name \_\_\_\_\_  
Position \_\_\_\_\_  
Dist. Dirg. Supt. \_\_\_\_\_  
Company  
**Atlantic Richfield Company**  
Date  
**2/02/78**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief

**December 16, 1977**

Signature of Surveyor  
*John W. West*  
Name **John W. West**  
Rank **Surveyor**



**ATLANTIC RICHFIELD COMPANY**  
**Blow Out Preventer Program**

**Lease Name** Empire Abo Unit "H"

**Well No.** 321

**Location** 1050' FSL & 250' FEL  
Sec 33-17S-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.**