

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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LAND OFFICE	
OPERATOR	/

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5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-2071	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DISTRICT OFFICE. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

MAR 27 1979

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator		Empire Abo Pressure Maintenance Project
3. Address of Operator		8. Farm or Lease Name
Box 1710, Hobbs, New Mexico 88240		Empire Abo Unit "H"
4. Location of Well		9. Well No.
UNIT LETTER M 1000 FEET FROM THE South LINE AND 1200 FEET FROM		331
THE West LINE, SECTION 34 TOWNSHIP 17S RANGE 28E NMPM.		10. Field and Pool, or Wildcat
		Empire Abo
15. Elevation (Show whether DF, RT, GR, etc.)		12. County
3658.4' GR		Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER Squeeze Cmt, Perf Lower in Abo & Treat <input checked="" type="checkbox"/>		OTHER <input type="checkbox"/>	

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.

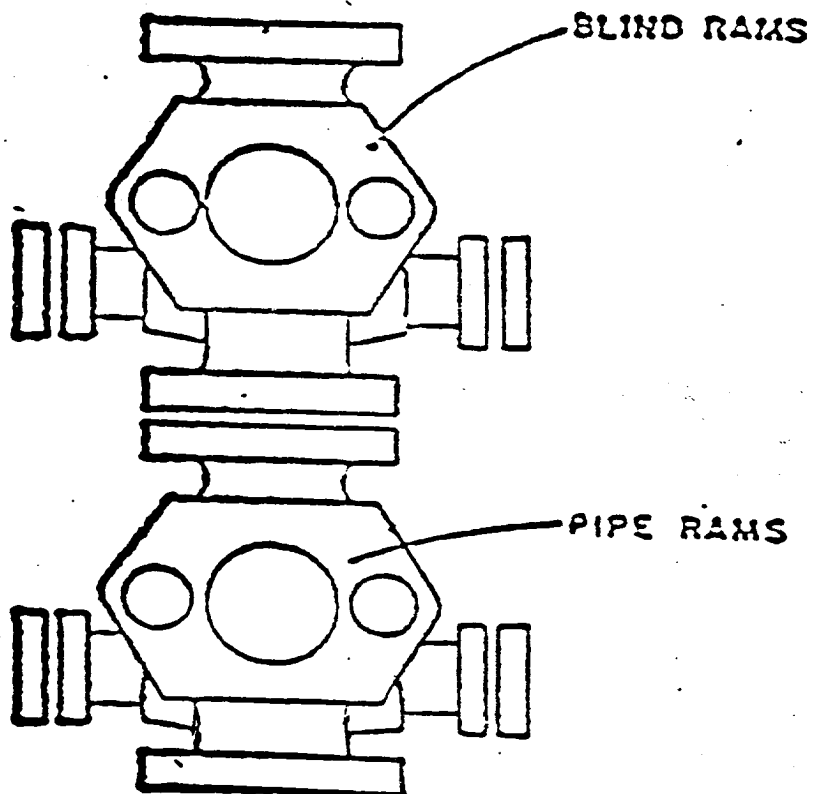
- Propose to cmt squeeze Abo perms 6196-6210', perf Abo lower & treat in the following manner:
1. Rig up, kill well, install BOP & POH w/tbg.
 2. Set cmt retr @ 6136'. Squeeze Abo perms 6196-6210' w/150 sx LWL cmt followed by 75 sx C1 C w/2% CaCl. WOC.
 3. Drill out retr & cmt. Pressure test csg & squeeze job to 1500# 30 mins.
 4. Perforate lower in Abo 6260-6270' w/2 JSPF.
 5. RIH w/compl assy w/pkr set @ 6250'.
 6. Treat perms w/150 gals 15% HCL-LSTNE-FE acid, 2000 gal gelled CaCl wtr, 2000 gal gelled LC, 1500 gal 15% HCL-LSTNE-FE acid. Swab back load & return to production.

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

SIGNED ESK for L.D. Lane TITLE Dist. Drlg. Supt. DATE 3/23/79

APPROVED BY W.A. Gressett TITLE SUPERVISOR, DISTRICT II DATE MAR 30 1979

CONDITIONS OF APPROVAL, IF ANY:



ATLANTIC RICHFIELD COMPANY
Blow Out Preventer Program

Lease Name Empire Abo Unit "H"

Well No. 331

Location 1000' FSL & 1200' FWL
Sec 34-17S-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.