Submit 3 Copies to Appropriate

State of New Mexico

Energy, Minerals and Natural Resources Department Revised 1-1. District Office OIL CONSERVATION DIVISION DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980 WELL API NO. 2040 Pacheco St. <u>30-015-22464</u> Santa Fe, NM 87505 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE X PEE [DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. 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" 7. Lease Name or Unit Agreement Name (FORM C-101) FOR SUCH PROPOSALS.) EMPIRE ABO UNIT 1. Type of Well: GAS WELL WELL X OTHER 2. Name of Operator 8. Well No. ARCO Permian H-301 3. Address of Operator 9. Pool name or Wildcat P.O. Box 1089 Eunice. NM 88231 EMPIRE ABO 4. Well Location S Unit Letter 1650 Feet From The Line and Feet From The Line 33 **17S** 28E **EDDY** Township Range **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3659.8° GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. **NOTICE OF INTENTION TO:** SUBSEQUENT REPORT OF: REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: MIT OTHER: 12. 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. 6378" PBD: 6025" PERFS: 5982-59921

01/21/97: CSG MIT WITNESSED BY KENT WHITMIRE - ARCO, AND APPROVED BY MIKE STUBBLEFIELD - NMOCD. PRESS TESTED TO 450#, HELD 15 MINS. HELD OK. CHART ATTACHED.

HOLD WELL FOR FIELD BLOW DOWN

ins Approval of Lemporary Abandonment Expines

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I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE Administrative Assistant DATE 01/28/98			
SIGNATURE KULLE W. MUMISS	TITLE Administrative Assistant	DATE	01/28/98
TYPE OR PRINT NAME Kellie D. Murrish		TELEPHONE NO.	505-394-1649
(This space for State Use) ORIGINAL CHANGE OF THE W. GUM			

DIRTHIOT II SUPERVISOR

2-2-98 TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: