Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office			
DISTRICT I	OIL CONSERVATIO		WELL API NO.
P.O. Box 1980, Hobbs NM 88241-1980 DISTRICT II	2040 Pacheco St. Santa Fe, NM 87505		30-015-22487
P.O. Drawer DD, Artesia, NM 88210	Salita 1.C, 1414 6	22324	6. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	1020 L	5 22324 2636 6	STATE X FEE
SUNDRY NOT	ICES AND REPORTS ON WELL	Stron W	E-7842
(DO NOT USE THIS FORM FOR PRO	OPOSALS TO DRILL OR TO DEEP BLC RVOIR. USE "APPLICATION FOR PERI -101) FOR SUCH PROPOSALS."	PRILIG BACK TO A 7	. Lease Name or Unit Agreement Name Empire Abo Unit "E"
1. Type of Well: OIL GAS WELL X WELL	OTHER		mp ii e 750 dii te E
2. Name of Operator	68	12990	. Well No.
ARCO Permian 3. Address of Operator			. Pool name or Wildcat
P.O. Box 1089 Eunice. NM 8	38231	1 -	moire Abo
4. Well Location	N N	1200	- -
Unit Letter A: 020	Feet From TheN	Line and 1200	Feet From The E Line
Section 34			MPM Eddy County
	10. Elevation (Show whether		
11. Check An	propriate Box to Indicate l		anort or Other Date
-	NTENTION TO:	1	EQUENT REPORT OF:
NOTICE OF III	TENTION TO:	3083	EQUENT REPORT OF.
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OF	PNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CEME	
— —		CASING 1231 AND CEMIC	508 —
OTHER:		OTHER:	L
12. Describe Proposed or Completed Operwork) SEE RULE 1103.	rations (Clearly state all pertinent deta	ils, and give pertinent dates,	, including estimated date of starting any proposed ρ . \downarrow . τ ρ .
TD: 6294° PBD: 6274°	PERFS: 6020-6030' 4" lin	ner @ 6058-6274°	Post ID
	/ RBP, retrieving tool on 2		TOH. RIH w/bailer.
	og to 6010'. Tag CIBP @ 601		
	D. Gary Williams present. lace 5-1/2" csg volume w/32		5920-5820'. Pull above plug to
			H to 3485'. Did not tag #2
plug. Pull ւ	p to 3475'. Spot #3 plug w	//50 sxs cmt.	•
			'. TOH. Set cmt plug #5 @
	TOH. Set cmt plug #6 @ 800 ssg 30' to surf. Well P&A'd		Tag TOC plug #6 @ 672'. NDBOP.
F111 5-1/2 C	sg 30 to sum. Well Park of	1 09/10/99.	
I hereby certify that the information above is t	rue and complete to the best of my knowledge	and belief.	
SIGNATURE JULIE W	Murish TITE	E Administrative As	sistant DATE 09/22/99
, ,			
TYPE OR PRINT NAME Kellie D. Mur	rish		TELEPHONE NO. 505-394-1649
(This space for State Use)			
APPROVED BY	TITL	E	DATE