

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

Form C-103
Revised 10-1-78

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RECEIVED BY
SANTA FE, NEW MEXICO 87501

APR 15 1987

O. C. D.
ARTESIA, OFFICE

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-7832	

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator ARCO Oil and Gas Company - Div of Atlantic Richfield Company	8. Farm or Lease Name Empire Abo Unit "E"
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240	9. Well No. 363
4. Location of Well UNIT LETTER <u>A</u> <u>650</u> FEET FROM THE <u>North</u> LINE AND <u>120</u> FEET FROM <u>East</u> LINE, SECTION <u>34</u> TOWNSHIP <u>17S</u> RANGE <u>28E</u> NMPM.	10. Field and Pool, or Wildcat Empire Abo
15. Elevation (Show whether DF, RT, GR, etc.) 3673.5' GR	12. County Eddy

16. 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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	Shut Well In <input checked="" 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.

On test 3/08/87 well produced 8 BO, 245 BW & 26 MCFG. Circulated well with corrosion inhibited water, closed tubing and casing valves and shut well in effective 4/01/87 pending evaluation. Final Report.

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

SIGNED Steven D. Smith TITLE Area Prod Supt. DATE 4/14/87

APPROVED BY Les A. Clement TITLE Supervisor District II DATE APR 23 1987
CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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FEB 12 1987

O. C. D.

Form C-103
Revised 10-1-75

5a. Indicate Type of Lease

State ☒ Fee ☐

5. State Oil & Gas Lease No.
E 7832

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO GRAB, DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name
2. Name of Operator ARCO Oil and Gas Company	8. Farm or Lease Name Empire Abo Unit "E"
3. Address of Operator P.O. Box 1610, Midland, TX 79702	9. Well No. 363
4. Location of Well UNIT LETTER <u>A</u> <u>650</u> FEET FROM THE <u>North</u> LINE AND <u>120</u> FEET FROM THE <u>East</u> LINE, SECTION <u>34</u> TOWNSHIP <u>17S</u> RANGE <u>28E</u> NMPM.	10. Field and Pool, or Wildcat Empire Abo
15. Elevation (Show whether DF, RT, GR, etc.) 3673.5 GR	12. County Eddy

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Add perms same zone & treat</u> <input checked="" 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 1703.

12-4-86. RU PU. POH w/CA.
12-5-86 Set CIBP @ 6240'. Perf Abo f/6198-6214' (34 holes). Acdzd w/2000 gals. Swab load.
12-8-86 In 10 hrs swab 4 BLO & 118 BFW.
12-9-86 Set CIBP @ 6178'. Perf Abo f/6150-56' (14 holes).
12-10-86 Acdzd Abo 6150-56' w/1000 gals.
12-11-86 14 hr SITP 0#. SFL 4100'. Made 2 swab runs well kicked off. In 6 hrs flwd 51 BNO & 62 BLW on 36/64" ck. FTP 100-200#.
12-12-86 In 16 hrs flwd 240 BNO & 26 BFW, 260 MCF 36/64", FTP 150#. POH w/pkr. RIH w/CA. Return to prod. 12-12-86.

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

SIGNED Kenn W. Gosnell TITLE Engr. Tech. Spec. DATE 2-5-87

Original Signed By

APPROVED BY A. Clements

CONDITIONS OF APPROVAL, IF ANY: Supervisor District II

TITLE DATE FEB 19 1987