

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	2
LAND OFFICE	1
OPERATOR	

Form C-105
Revised 11-68

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

RECEIVED

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No. 647-368 647-363 647-320	

1. TYPE OF WELL	
OIL WELL ☒	GAS WELL ☐
2. TYPE OF COMPLETION	
NEW WELL ☒	WORK OVER ☐

APR 17 1979

O.C.C.
ARTESIA, OFFICE

7. Unit Agreement Name Empire Abo Pressure Maintenance Project
8. Form or Lease Name Empire Abo Unit "F"
9. Well No. 383

3. Name of Operator ARCO Oil and GAS COMPANY ✓
3. Address of Operator Division of Atlantic Richfield Company Box 1710, Hobbs, New Mexico 88240

10. Field and Pool, or Wildcat Empire Abo
--

4. Location of Well
UNIT LETTER <u>F</u> LOCATED <u>1600</u> FEET FROM THE <u>North</u> LINE AND <u>2350</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>35</u> TWP. <u>17S</u> RGE. <u>28E</u>

11. County Eddy

15. Date Spudded 2/9/79	16. Date T.D. Reached 2/24/79	17. Date Compl. (Ready to Prod.) 3/4/79	18. Elevations (DF, RKB, RT, GR, etc.) 3678.4' GR	19. Elev. Casinghead
20. Total Depth 6300'	21. Plug Back T.D. 6250'	22. If Multiple Compl., How Many	23. Intervals Drilled By Rotary Tools 0-6300'	Cable Tools

24. Producing Interval(s), at this completion - Top, Bottom, Name 6188-6200' Abo Reef	25. Was Directional Survey Made No
--	---------------------------------------

26. Type Electric and Other Logs Run DLL/RXO, CNL/FDC, GR Caliper & CBL	27. Was Well Cored No
--	--------------------------

CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB. FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8" OD	24# K-55	795'	11"	330 sx	
5-1/2" OD	15.5# K-55	6300'	7-7/8"	1360 sx	

LINER RECORD				TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SIZE	DEPTH SET	PACKER SET
				2-3/8" OD	6141'	6141'

31. Perforation holes (Interval, size and number) 6188'6200' 48- .50" holes = 4 JSPF	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL 6188-6200' AMOUNT AND KIND MATERIAL USED 150 gals 15% HCL-NE-LST acid, 2000 gal 10# gelled CaCl wtr, 2000 gal gelled LC, 1500 gal 15% HCL-LSTNE acid, flushed w/24 BLO.
---	---

33. PRODUCTION	
Date First Production 3/4/79	Production Method (Flowing, gas lift, pumping - Size and type pump) Pumping - hydraulic
Date of Test 4/9/79	Hours Tested 24 hrs
Flow Testing Press. -	Casing Pressure Pkr

34. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold	Well Status (Prod. or Shut-in) Prod
--	--

35. List of Attachments Logs as listed in Item 26 above & Inclination Report

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.		
SIGNED <u>[Signature]</u>	TITLE <u>Dist. Drlg. Supt.</u>	DATE <u>4/16/79</u>

