STATE OF NEW MEXICO

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	- CHOEDY ATION DIVISION	•
NO. OF COPIES EGILINES	CONSERVATION DIVISION	Form C-103
	P. O. BOX 2088	Revised 10-1-78
DISTRIBUTION	ANTA FE. NEW MEXICO 87501	
SANTA . E	ANTA FE, NEW MEXICO 8798	5a, Indicate Type of Lease
FILE		State X Fee
U.S.O.S.	1111 0	5, State Oil & Gas Lease No.
LAND OFFICE	JUL -8 1987	
OPERATOR		E-7832
	O. C. D.	
CHADDY NOTICES A	ND REPORTS ON WELLS	
DONNER THIS FORM FOR PROPOSALS TO WRILL O	A TO DECPEN OR PLU BACK TOTAL ENTER CHITCHE	
USE "APPLICATION FOR PERMIT -	ND REPORTS ON WELLS. C. D. IN TO DECPEN OR PLU BACK TORTEGIA OFFICE ERVOIR.	7. Unit Agreement Name
OIL X GAS WELL OTHER-		8, Farm or Lease Name
Nume of Operator ARCO 011 and Gas Company - Div of Atlantic Richfield Company		Empire Abo Unit "E"
ARCO Oil and Gas Company - Div of	9. Well No.	
3. Address of Operator	362	
P. O. Box 1710, Hobbs, New Mexico	88240	10. Field and Pool, or Wildcat
C. Location of Wall	Name 1200	Empire Abo
A 1200 FEET F	FROM THE NORTH LINE AND 1200 FEET	VIIIIIIIII XXXXXXXXXXXXXXXXXXXXXXXXXXXX
3/	TOWNSHIP 17S FANGE 28E	KMOM.
THE East LINE, SECTION 34	TOWNSHIP	7777777777777
	levation (Show whether DF, RT, GR, etc.)	12. County
TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT		Eddy
	3675.9' GR	
	Box To Indicate Nature of Notice, Report	or Other Data
16. Check Appropriate 1	30x 10 Indicate Nature of Robbet 100	WENT REPORT OF:
NOTICE OF INTENTION TO	D: 30B3EQ	OCK THE OWN
110110	_	¬
	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
PERFORM REMEDIAL WORK	COMMENCE DRILLING OPHS.	PLUG AND ABANDONHENT
TEMPORARILY ABANDON		7
	CHANGE PLANS CASING TEST AND CEMENT JOB	Shut In X
PULL OR ALTER CASING	OTHER	Jilde III
OTHER		
	y state all pertinent details, and give pertinent dates, in	cluding estimated date of starting any proposed
17. Describe Proposed or Completed Operations (Clear)	y state all pertinent perant, and govern	
work) SEE RULE 1103.		
•		
	49 BW & 17 MCFG. Closed tubing and	l casing valves and snut
On 5/14/87 well produced (1 BU, 3	Tinal Report.	
on 5/14/87 well produced 0 BO, 5 well in effective 6/29/87 pendin	g evaluation. Final Report.	
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18. I hereby certify that the information above is true and complet	e to the best of my knowledge and belief.		
	Area Prod Supt.	DATE	37
Original Signed By	TITLE	DATE JUL	9 1987