

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

|   |
|---|
| WELL API NO.<br>30-015-22823  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>EMPIRE ABO UNIT "G"   |
| 8. Well No.<br>361  |
| 9. Pool name or Wildcat<br>EMPIRE ABO   |

|  |                            |
|--|----------------------------|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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. Type of Well:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>  | RECEIVED<br>MAY - 7 1991   |
| 2. Name of Operator<br>ARCO OIL AND GAS COMPANY  | O. C. D.<br>ARTESIA OFFICE |
| 3. Address of Operator<br>P. O. BOX 1710, HOBBS, NEW MEXICO 88240  |                            |
| 4. Well Location<br>Unit Letter I : 2400 Feet From The SOUTH Line and 300 Feet From The EAST Line<br>Section 34 Township 17S Range 28E NMPM EDDY County  |                            |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>3670.5 GR  |                            |

|   |  |
|---|--|
| 11. 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"/>                                | REMEDIAL WORK <input type="checkbox"/>                         |
| PLUG AND ABANDON <input type="checkbox"/>                                     | ALTERING CASING <input type="checkbox"/>                       |
| TEMPORARILY ABANDON <input type="checkbox"/>                                  | COMMENCE DRILLING OPNS. <input type="checkbox"/>               |
| CHANGE PLANS <input type="checkbox"/>   | PLUG AND ABANDONMENT <input type="checkbox"/>                  |
| PULL OR ALTER CASING <input type="checkbox"/>                                 | CASING TEST AND CEMENT JOB <input type="checkbox"/>            |
| OTHER: <input type="checkbox"/>   | OTHER: TEMPORARILY ABANDON <input checked="" type="checkbox"/> |

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.

TA & HOLD WELL BORE FOR FIELD BLOW DOWN

TD 6350'; PERFS: 6028-6042'

4/29/91 MIRU. DDP. ND WH NU BOP UNSET PKR. POH w/TBG, S.N. AND PKR. GIH w/4-3/4" BIT, 5-1/2" CSG SCRAPER, AND TBG. TAG UP IN WELL. POH w/TBG, SCRAPER, AND BIT. GIH w/CIBP, RUNNING TOOL, AND TBG. SET CIBP. POH w/1 JT TBG. RU KILL TRUCK. CIRC WELL w/8.6# BRINE w/WT675 CHEMICAL. SDON.

4/30/91 PRESSURE UP WELL TO 680#. HELD FOR 15 MINS. NO LOSS IN PRESSURE. RD KILL TRUCK. POH w/TBG AND CIBP RUNNING TOOL. LAYING TBG DOWN IN SINGLES. CIBP @ 6010.53'. PRESSURE TEST CHART ATTACHED. TEST WITNESSED BY JOHNNIE ROBINSON AND GARY WILLIAMS, NMOCD.

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

SIGNATURE James D. Cogburn TITLE Administrative Supervisor DATE 5/6/91  
TYPE OR PRINT NAME James D. Cogburn TELEPHONE NO. 392-1600

(This space for State Use)

APPROVED BY Gary Williams TITLE Field Rep DATE 5/13/91  
CONDITIONS OF APPROVAL, IF ANY:

