

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
647-340, 647-351

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.)		APR 12 1979
1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		O. C. C. ARTESIA, OFFICE
2. Name of Operator ARCO Oil & Gas Company Division of Atlantic Richfield Company		7. Unit Agreement Name Empire Abo Pressure Maintenance Project
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240		8. Farm or Lease Name Empire Abo Unit "G"
4. Location of well UNIT LETTER J, 1450 FEET FROM THE South LINE AND 2000 FEET FROM THE East LINE, SECTION 33 TOWNSHIP 17S RANGE 28E NMPM.		9. Well No. 314
15. Elevation (Show whether DF, RT, GR, etc.) 3661.7' GR		10. Field and Pool or Wildcat Empire Abo
		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 ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☒
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☒ Surface
OTHER ☐	OTHER ☐
PLUG AND ABANDON ☐	ALTERING CASING ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐

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.

Spudded 11" hole @ 6:30 PM 4-3-79. Finished drlg 11" hole to 763' @ 4:30 AM 4-4-79. RIH w/8-5/8" OD 24# K-55 casing set @ 763'. Cmt 8-5/8" OD casing w/500 sx RFC cmt contg 1/4# flocele, 12#/sk gilsonite followed w/100 sx C1 C Cmt Contg 2% CaCl. Cmt did not circ. Temp survey indicated TOC @ 260' fr. suf. RIH w/1" tbg behind 8-5/8" csg & cmt 260' to surface w/250 sx C1 C Cmt, circ 5 sx cmt. WOC 18 hrs. Pressure tested csg to 1000# for 30 mins. Tested OK.

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

SIGNED [Signature] TITLE Dist. Drlg. Supt. DATE 4-10-79

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE APR 13 1979

CONDITIONS OF APPROVAL, IF ANY: