Submit 3 Conies to Appropriate

## State of New Mexico Energy, Minerals and Natural Resources Department



District Office

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

## OIL CONSERVATION DIVISION

P.O. Box 2088 (FD) Santa Fe, New Mexico 87504-2088 WELL API NO. 30-015-22890 STATE FEE L

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 SEP 25'90 6. State Oil & Gas Lease No. 647-371 SUNDRY NOTICES AND REPORTS ON WELLS ( D. ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUGIBLE'S TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERSENT") (FORM C-101) FOR SUCH PROPOSALS.) Empire Abo Unit "F" 1. Type of Well: MET X WELL OTHER 2. Name of Operator 8. Well No. 343 ARCO OIL AND GAS COMPANY 3. Address of Operator 9. Pool name or Wildcat Empire Abo O. Box 1610, Midland, Texas 4. Well Location 2300 Feet From The North 1675 Unit Letter West Line and Feet From The 34 17S 28E Eddy Section Township Range **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3662.2 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **CHANGE PLANS TEMPORARILY ABANDON** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING CASING TEST AND CEMENT JOB** Recomplete Abo OTHER: OTHER: 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. 8-30-90. RUPU. POH w/CA. WL set CIBP at 6200. Press test csg & CIBP to 500#. Perf Abo f/6154-6168. Acidize w/1000 gals. WL set CIBP at 6140. Perf Abo f/6110-6118. Acidize w/1000 gals. Fow test. RIH w/CA: 2 3/8 tbg & pkr to 6024. Circ hole w/pkr fluid. Set pkr at 6024. Press test annulus to 500#. RDPU 9-6-90. 9-12-90. In 24 hrs flowed 0 BO 0 BW 1.2 MMCF, 20/64 ck, FTP 560#,

I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Ken a Sofnell	mme Engr. Tech.	DATE9-21-90
TYPEOR PRINT NAME Ken W. Gosnell	915/688-5672	TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY MIKE WILLIAMS

DATE -

APPROVED BY -SUPERVISOR, DISTRICT IT

0# CP, 0# surf csg.

SEP 2 6 1990