

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                        |   |
|------------------------|---|
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MAY 23 1979

|                                           |                              |
|-------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| 647-364                                   |                              |
| 7. Unit Agreement Name                    |                              |
| Empire Abo Pressure Maintenance Project   |                              |
| 8. Farm or Lease Name                     |                              |
| Empire Abo Unit "F"                       |                              |
| 9. Well No.                               |                              |
| 334                                       |                              |
| 10. Field and Pool, or Wildcat            |                              |
| Empire Abo                                |                              |
| 12. County                                |                              |
| Eddy                                      |                              |

SUNDY 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-1011 FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator **ARCO Oil and Gas Company** ✓  
Division of Atlantic Richfield Company

3. Address of Operator  
Box 1710, Hobbs, New Mexico 88240

4. Location of Well  
UNIT LETTER E 1700 FEET FROM THE North LINE AND 620 FEET FROM  
THE West LINE, SECTION 34 TOWNSHIP 17S RANGE 28E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
3674.8' GR

16. 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"/>                                 |
| TEMPORARILY ABANDON <input type="checkbox"/>   | COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>            |
| PULL OR ALTER CASING <input type="checkbox"/>  | CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> Surface |
| OTHER <input type="checkbox"/>                 | OTHER <input type="checkbox"/>                                         |
| PLUG AND ABANDON <input type="checkbox"/>      | ALTERING CASING <input type="checkbox"/>                               |
| CHANGE PLANS <input type="checkbox"/>          | PLUG AND ABANDONMENT <input type="checkbox"/>                          |

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 @ 2:15 PM 5/10/79. Fin drlg 11" hole to 750' @ 10:45 AM 5/11/79. RIH w/8-5/8" OD 24# K-55 csg, set @ 750'. Cmdt 8-5/8" OD csg w/350 sx Thikset cmt cont'g 12# Gilsonite, 1/4# flocele/sk, 3% CaCl followed by 100 sx Cl C cmt w/2% CaCl. No returns. Ran Temp Survey, indicated TOC @ 150' FS. Cmdt 8-5/8" x 11" annulus 150' to surf w/200 sx Cl C Neat cmt. WOC 18 hrs. Pressure tested 8-5/8" OD csg to 1000# 30 mins 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 5/18/79

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT, II DATE MAY 24 1979

CONDITIONS OF APPROVAL, IF ANY: