

|                        |   |
|------------------------|---|
| NO. OF COPIES RECEIVED | 3 |
| DISTRIBUTION           |   |
| SANTA FE               | 1 |
| FILE                   | 1 |
| U.S.G.S.               |   |
| LAND OFFICE            |   |
| OPERATOR               | 1 |

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

JUN 29 1979

O. C. C.  
CATERIA, OFFICE

Form C-103  
Revised 10-1-78

|                                           |                              |
|-------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| 647-349                                   | 647-351                      |
| 7. Unit Agreement Name                    |                              |
| Empire Abo Pressure Maintenance Project   |                              |
| 8. Farm or Lease Name                     |                              |
| Empire Abo Unit "F"                       |                              |
| 9. Well No.                               |                              |
| 391                                       |                              |
| 10. Field and Pool, or Wildcat            |                              |
| Empire Abo                                |                              |
| 12. County                                |                              |
| Eddy                                      |                              |

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.)

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 G 1545 FEET FROM THE North LINE AND 1625 FEET FROM  
THE East LINE, SECTION 35 TOWNSHIP 17S RANGE 28E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
3680.6' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

|                                                |                                           |                                                                         |                                               |
|------------------------------------------------|-------------------------------------------|-------------------------------------------------------------------------|-----------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                                  | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>             | PLUG AND ABANDONMENT <input type="checkbox"/> |
| FULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/> Surface |                                               |

SUBSEQUENT REPORT OF:

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 17½" hole @ 10:15 AM 6/25/79. Fin drlg 17½" hole to 745' @ 1:30 PM 6/25/79. RIH w/ 13-3/8" OD 54.5# K-55 csg set @ 745', FC set @ 699'. Cmtd 13-3/8" OD csg w/650 sx Thik-set cmt w/2% CaCl. PD @ 8:00 PM 6/25/79. Circ 100 sx cmt to pit. WOC 18 hrs. Drld FC @ 699'. Pressure tested csg to 1000# 30 mins. Tested OK. Drld new fm @ 8:45 PM 6/26/79.

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 6/27/79

APPROVED BY W. A. Gressett TITLE SUPERVISOR, DISTRICT II DATE JUN 29 1979

CONDITIONS OF APPROVAL, IF ANY: