Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT

OII CONSEDUATION DIVISION

Form C-103
Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240	ox 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION DO Por 2009			WELL API NO.		
P.O. Box 2088 DISTRICT II Santa Fe, New Mexico 87504-2088			300152291100			
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	-	-0.000	07304-2000	5. Indicate Type	e of Lease STATE X	FEE
1000 Rio Brazos Rd., Aztec, NM 8741	0			6. State Oil & C	Jas Lease No.	
SUNDRY NO	TICES AND DEPORTS O	A 1 1475		647-349	647-351	77777777
(DO NOT USE THIS FORM FOR I DIFFERENT RES (FORM	OTICES AND REPORTS OPROPOSALS TO DRILL OR TO DESERVOIR. USE "APPLICATION IN C-101) FOR SUCH PROPOSAL	PEEPEN FOR PE	OR PLUG BACK TO A	7. Lease Name	or Unit Agreement Nam	<u>/////////////////////////////////////</u>
1. Type of Well: Off. GAS WELL X WELL	OTHER			EMPIRE	ABO UNIT F	
2. Name of Operator ARCO OIL AND GAS COM	PANY	A	PR 05 '89	8. Well No. 391		
3. Address of Operator BOX 1710, HOBBS, NEW	MEXICO 88240		O. C. D. Tesia, office	9. Pool name or EMPIRE		
4. Well Location Unit Letter G : 1	545 Feet From The NORT			*************************************	•	Line
Section 35	Township 17S	Ra	unge 28E	nmpm EDD		County
	GR 3680.6		DF, RKB, RT, GR, etc.)			
11. Checl	k Appropriate Box to Ind NTENTION TO:	icate l		-	er Data REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASING	s [
TEMPORARILY ABANDON X	CHANGE PLANS		COMMENCE DRILLING	OPNS.	PLUG AND ABAND	ONMENT [
PULL OR ALTER CASING			CASING TEST AND CE	MENT JOB		
OTHER:			OTHER:		-	
12. Describe Proposed or Completed Operate SEE RULE 1103.	erations (Clearly state all pertinent de	etails, an	d give pertinent dates, includ	ing estimated date of	of starting any proposes	đ
Procedures as follows:						
1. MIRU DDPU						
2. Shear standing va	lve					
3. RIH w/Swab to cle	ar tbg					
4. Install BOP & POH	w/tbg & ACC					
5. RIH w/CIBP on tbg						
6. Set CIBP @ 6135 R	KB					
7. POH w/1 jt 8. Pump 105 BBLS 8.6	# 1 4 10 1	(75/1	0.77			
•	# brine w/2 gal WT (Press. test to 500#	5/5/I 	O BF to establi	sh circula	tion	
	, laying the down.			•		
0 ,	ld, get ahold of Eng	neav De	er je on mange	e instruction	ne	
12. RDCL. Close all	tbg, csg, surface cs	sg va	lves	instruction		
I hereby certify that the information above is to	rue and complete to the best of my knowle	edge and b	pelief.		··	
SIGNATURE	John	тт	Services Supe	ervisor	DATE4-3-8	39
TOREOR FRINT NAME					TELEPHONE NO.	
	inal Signed By ike Williams				400	
APPROVED BY		<u></u> тп		*	— PATE ———	0 1989
CONDITIONS OF APPROVAL, IF ANY:	W W			**		

Notification to witness
Remedial Work

FIELD	OPERATOR	DATE
EMPIRE ABO	WELL NO. LOCATIO	4-3-89 DN
EMPIRE ABO 2	WIT F 391 UNIT	6, 535, T175, 28E

ij

13 3/8 "CASING SET AT 745 WITH 550 SXOF _____ CEMENT HOLE SIZE 17 1/2 TOC @ _____. 8 5/8 "CASING SET AT 3010 WITH 950 SX OF CEMENT HOLE SIZE // TOC @ ______ 5 1/2 "CASING SET AT 6205 WITH 1125 SX OF _____ CEMENT HOLE SIZE 7 7/8 TOC @ ______

TOTAL DEPTH 6425

PERFS 6142-48