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State of New Mexico Energy, Minerals and Natural Resources Department



07/14/99

OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs NM 88241-1980 2040 Pacheco St. 30-015-30276 Santa Fe, NM 87505 DISTRICT II 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE X FEE L DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Washington 33 State 1. Type of Well: OIL WELL X OTHER 8. Well No. 2. Name of Operator ARCO Permian 9. Pool name or Wildcat 3. Address of Operator Artesia Queen Grayburg SA P.O. Box 1089 Eunice, NM 88231 4. Well Location 1550 260 Unit Letter Feet From The Line and Feet From The Eddy 33 **17S** NMPM Township Range County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. **NOTICE OF INTENTION TO:** SUBSEQUENT REPORT OF: |X|ALTERING CASING PLUG AND ABANDON PERFORM REMEDIAL WORK REMEDIAL WORK PLUG AND ABANDONMENT CHANGE PLANS COMMENCE DRILLING OPNS. **TEMPORARILY ABANDON** CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: Add SA Shallow Sands 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. PBD: 2904' PERFS: 2286-2808' 2950" MIRUPU, POH w/rods & pmp. Install & test BOP POH w/tbg. RIH w/bit & scraper, tag PBTD @ 2905', POH. Set RBP on wireline above lower San Andres perfs @ 2200'. RIH & perf San Andres Shallow Sands 1422-2068'. Frac San Andres Shallow Sand perfs down csg. Force close well 1-1/2-2 BPM. Flow well back & kill w/produced wtr if necessary to clean out frac sand & pull RBP. RIH w/tbg & anchor RIH w/rods & pmp. Place well on pump. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

TYPE OR PRINT NAME Kellie D. Murrish			TELEPHONE NO.	505-394-1649
(This space for State Use)	BGD	0:4:.	_	
Sim W.	Gum	Mistrict Supervisor		19-99
CONDITIONS OF APPROVAL, IP ANY:				

TITLE Administrative Assistant