		N. M.	O. C. C. COPY		Cein,	15%	
Form 9-331 U TED STATES SUBMIT IN TRESTATE				CATE*	5. LEASE DESIGNATION AND SERIAL NO. LC 028480 (a)		
		ES AND REPORT s to drill or to deepen or p ION FOR PERMIT—" for su	S ON WELLS lug back to a different reservich proposals.)	roir.	6. IF INDIAN, ALLOTTEE	OR TRIBE NAME	
OIL X GAS WELL X	OTHER				7. UNIT AGREEMENT NA	ME	
2. NAME OF OPERATOR Atlantic Richfield Company 3. ADDRESS OF OPERATOR P.O. Box 1710 - Hobbs, New Mexico 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface					8. FARM OR LEASE NAM	8. FARM OR LEASE NAME Empire Abo Unit "B" 9. WELL NO.	
					10. FIELD AND POOL, OR WILDCAT Empire Abo 11. SEC., T., R., M., OR BLK. AND SURVEY OR ABEA		
1980' FNL & 33	30' FWL (U	Init Letter E)			SURVEY OR AREA		
14. PERMIT NO.	1	15, ELEVATIONS (Show wheth	er DF, RT, GR, etc.)		29-17S-29E 12. COUNTY OR PARISH	13. STATE	
		3670' GE	3		Eddy	N.M.	
16.	Check App	ropriate Box To Indica	te Nature of Notice, Re	port, or C	Other Data		
NOT	CICE OF INTENT		1		ENT REPORT OF:		
TEST WATER SHUT-OFF	PU	LL OR ALTER CASING	WATER SHUT-OFF		REPAIRING V	VELL	
FRACTURE THEAT		LTIPLE COMPLETE	FRACTURE TREAT	1	ALTERING CA	!	
SHOOT OR ACIDIZE REPAIR WELL		ANDON* ANGE PLANS	SHOOTING OR ACT	· —	ABANDONMEN lowable Transfe	1!	
(Other)			(Note: Rep Completion	port results or Recompl	of multiple completion etion Report and Log for	on Well	
· B.					and En		
			CEIVED	RE	CATALLY AND	? }	
			T 2 1 1975	<i>\(\)</i> :	S. C. S. A. Mich		
		ART	O. C. C.		· ·		
18. I hereby certify that the	e foregoing is a		Dist Prod & Drlg	Supt	9-26-	- 75	
(This space for Cederal	or State office	use)					
PRINCED BY		TITLE			DATE		
CONDITIONS OF ARP	ROVAL, IF AN						
X/ (BEEK)	a L				•		

*See Instructions on Reverse Side