	N. M. C	). C. C. CUPY -	Capy 6 SF
Form 9-331 (May 1963)	U CED STATES	SUBMIT IN TRI ATE*	Form approvéd. Budget Bureau No. 42-R1424
DEPA	RTMENT OF THE INTER	IOR verse side)	5. CEASE DESIGNATION AND SERIAL NO.
	GEOLOGICAL SURVEY		LC 028480 (a)
	POTICES AND REPORTS ( proposals to drill or to deepen or plug PLICATION FOR PERMIT—" for such p		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1. OIL CAS OTH WELL OTH	7. UNIT AGREEMENT NAME		
2. NAME OF OPERATOR			8. FARM OR LEASE NAME
Atlantic Richfield Company			Empire Abo Unit "C"
3. ADDRESS OF OPERATOR			9. WELL NO.
P.O. Box 1710 - Hobbs, New Mexico 88240			50
<ol> <li>LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface</li> </ol>			10. FIELD AND FOOL, OR WILDCAT Empire Abo
2310' FSL & 1650' FW	L (Unit Letter K)		11. SEC., T., R., M., OR BLK. AND SUBVEY OR AREA 29-175-29E
14. PERMIT NO.	15. ELEVATIONS (Show whether D	F, RT, GR, etc.)	12. COUNTY OF PARISH 13. STATE
	3610' GR		Eddy N.M.
16. Chec	k Appropriate Box To Indicate N	Nature of Notice, Report, or (	Other Data
			UENT REFORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS		llowable Transferred
(Other)		(NOTE : Report results Completion or Recomp	s of multiple completion on WellX
17. DESCRIBE PROPOSED OR COMPLET proposed work. If well is nent to this work.) *	ED OPERATIONS (Clearly state all pertine) directionally drilled, give subsurface loca	nt details, and give pertinent dates ations and measured and true vertic	, including estimated date of starting any al depths for all markers and zones perti

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The above well was shut-in on October 1, 1973. The well was shut-in because it is a

high GOR well. Allowable transferred under NMOCC Orders R-4548, R-4549, R-4549-A, R-4549-B.

	RECEIVED	
	OCT 2 1 1975	
	O. C. C.	
18. I hereby certify that the foregoing is true and correct SIGNED	TITLE Dist Prod & Drlg Supt	DATE9-26-75
(This space for Federal or State office use) AAD THE ANY - D ACONDITIONS OF APPROVAL, IF ANY :	TITLE	DATE
OCT 81 1375 T. L. BLEFAN ACTILS DISTRICT FOR THE SE	e Instructions on Reverse Side	