

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TR. ATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Salt Water Injection Well		5. LEASE DESIGNATION AND SERIAL NO. NM 14840	
2. NAME OF OPERATOR Atlantic Richfield Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240		7. UNIT AGREEMENT NAME Empire Abo Unit "C"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2310' FSL & 330' FWL (unit letter L)		8. FARM OR LEASE NAME	
14. PERMIT NO.		9. WELL NO. 49	
15. ELEVATIONS (Show whether DF, ST, or other) 3640' DF		10. FIELD AND POOL, OR WILDCAT Empire Abo	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 29, 17S, 29E	
		12. COUNTY OR PARISH Eddy	
		13. STATE N.M.	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Convert to salt water Inj. <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Present TD 6294', Old PBTD 6266'. Present perfs 6247-6257'.
On 6/24/74 drilled on ret & drilled out to 6290' (new PBTD). POH w/drill string. WIH w/2-7/8" OD tbg & pkr, set pkr @ 6162'. Acidized perfs 6247-6257' w/2000 gals 15%, 36 bbls @ 4 to 6 BPM, MTP 1700#, 48 bbls @ 4 BPM, MTP 1400#. Flushed w/43 bbls prod wtr. POH w/tbg & pkr. Perf'd 6272-82' w/1 JSPF. WIH w/2-7/8" EUE tbg & pkr. Set @ 6265'. Acidized perfs 6272-6282' w/4000 gals 15%, MTP 2950#, Min 950#, AIR 5 BPM, ISIP vacuum. POH w/tbg & pkr. Ran prod pkr @ 6231'. WIH w/2-7/8" EUE internally plastic coated tbg & set in pkr @ 6231'. Connected up wellhead for salt water injection. Disposing of water rate of 5 BPM on vacuum. Completed as salt water injection well on 6/27/74. Final Report.

Form C-120A rec'd 7/24/74 showing disposal of salt water began in June, 1974. 270 bbls of water disposed.

RECEIVED

JUL 15 1974

O. C. C.
ARTESIA, OFFICE

18. I hereby certify that the foregoing is true and correct

SIGNED

W. L. BEEKWIND

TITLE Dist. Drlg. Supv.

DATE 7/9/74

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JUL 12 1974
R. L. BEEKWIND
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side