

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
811 S. 1st St.  
Artesia, NM 87010-2824

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT - " for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other

2. Name of Operator  
ARCO Permian

3. Address and Telephone No.

P.O. Box 1089, Eunice, NM 88231

505-394-1649

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit Letter H, 2310' FNL & 990' FEL  
Sec. 30-T17S-R29E

LC028480A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8910138010

8. Well Name and No.

Empire Abo Unit "B" 48

9. API Well No.

30-015-03195

10. Field and Pool, or exploratory Area

Empire Abo

11. County or Parish, State

Eddy

NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☒ Casing Repair  
☐ Altering Casing  
☐ Other

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

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

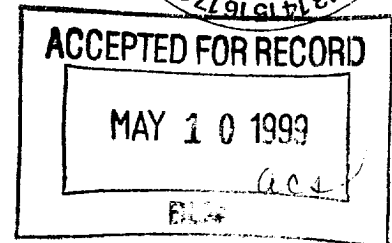
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

TD: 6306' PBD: 6295' PERFS: 6180-6280'

04/20/99: Cut over original pkr. Ran RBP & pkr. Test csg to 800#, held OK.  
Ran 5-1/2" X 2-7/8" pkr to 6884'. 2-7/8" IPC tbg @ 6094'. Pmp 100  
bbl treated wtr. Set pkr load annulus. Press tst to 640# psi, 30 mins  
held OK.

04/22/99: Notify NMOCD to witness MIT 8:00 AM 04/23/99.

04/23/99: Press 5-1/2" csg to 500# psi for 30 mins. Held OK. Chart attached.  
NMOCD not present. Return to injection.



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

Signed

*Heidi K. Munnish*

Title Administrative Assistant

Date 05/02/99

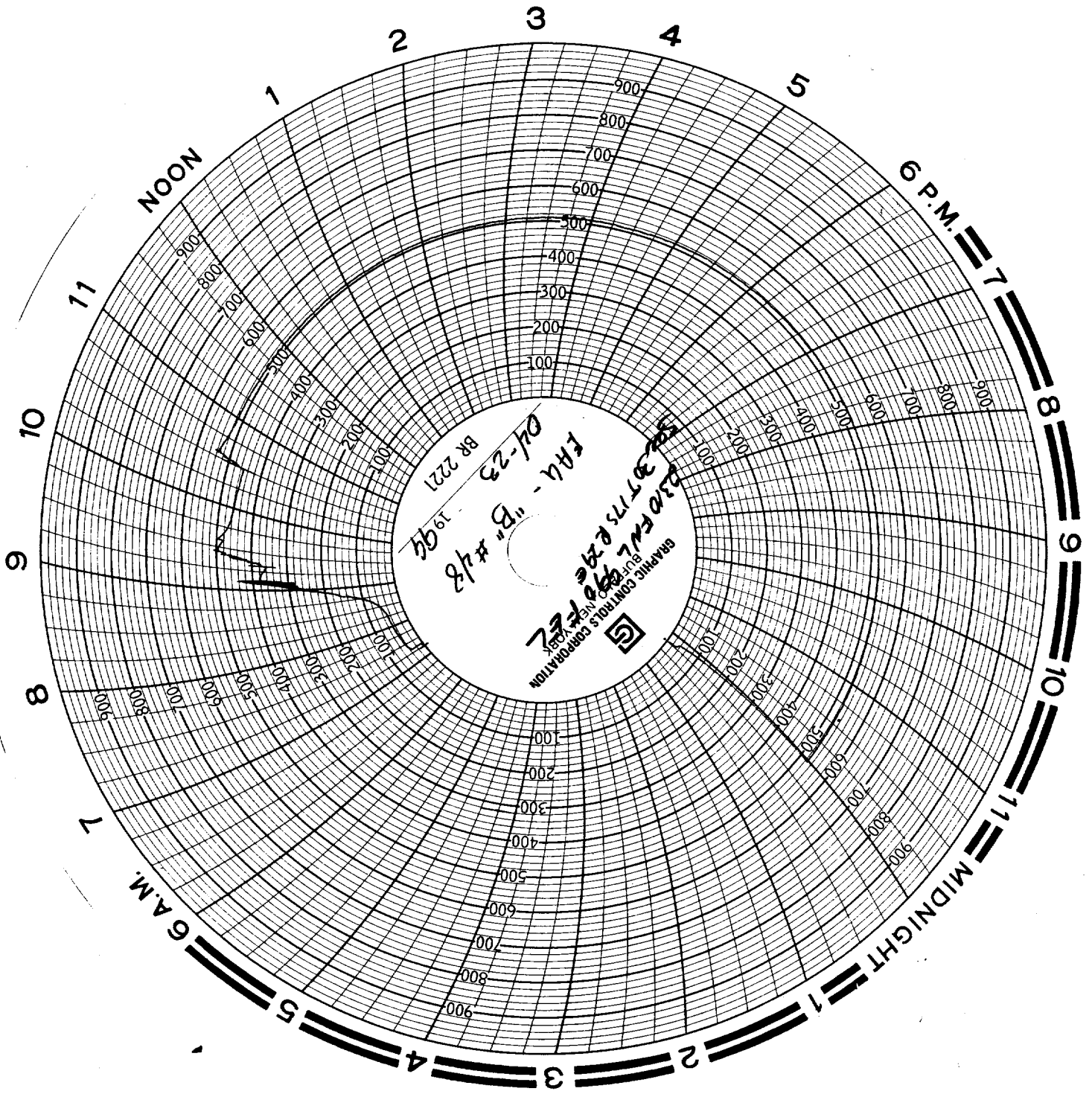
(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:



RECORDED  
MAY 5 1968  
BIRM  
ROSWELL, NM

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Sec. 30-T17S-R29E

5. Lease Designation and Serial No.

LC028480A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

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