

Dec. 1973

Budget Bureau No. 42-R1424

NM OIL CONS. COMMISSION UNITED STATES
 Drawer DD DEPARTMENT OF THE INTERIOR
 Artesia, NM 88210 GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐
2. NAME OF OPERATOR ARCO Oil and Gas Company
 Division of Atlantic Richfield Company
3. ADDRESS OF OPERATOR
 P. O. Box 1710, Hobbs, New Mexico 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
 AT SURFACE: 330' FNL & 990' FWL
 AT TOP PROD. INTERVAL: as above
 AT TOTAL DEPTH: as above
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	TEST WATER SHUT-OFF	FRACTURE TREAT	SHOOT OR ACIDIZE	REPAIR WELL	PULL OR ALTER CASING	MULTIPLE COMPLETE	CHANGE ZONES	ABANDON*	(other)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

5. LEASE
 LC-029342-C
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
 W. D. McIntyre "C" **AUG 16 1983**
9. WELL NO.
 1 **O. C. D.**
10. FIELD OR WILDCAT NAME **ARTESIA, OFFICE**
 Grayburg Jackson QGSA
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 21-17S-30E
12. COUNTY OR PARISH **Eddy** 13. STATE **New Mexico**
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
 3662' GR

(NOTE: Report results of multiple completion of zone change on Form 9-330.)

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.)*

RU 7/11/83, POH w/rods & pump, installed BOP. POH w/tbg. Set RBP @ 2519'. Tested csg to 1000#, no increase in water flow out BH. Ran bore hole audio tracer survey 2504' to surf. Indicated water flow @ 828'. Ran CBL 2504' to TOC @ 1590', OK. Dug out cellar below BH. Found water flow. Spotted 4 sx sd on top of BP @ 2519'. Perf'd 7" csg 1500-1502' w/4 .48" holes. Set pkr @ 1305'. Cmtd thru perfs 1500-1502' w/1500 sx Howco Lite Thick-set cmt cont'g 16#/sk salt, 1/2#/sk flocele followed by 200. sx Cl H Neat cmt. Circ cmt outside 10-3/4" csg & out 7" x 10-3/4" annulus. WOC. RIH w/bit, found cmt @ 1434'. DO cmt to 1510', press tested csg to 1000# for 30 mins OK. Circ sd off BP. POH w/RBP. RIH w/tbg & pkr. Set pkr @ 2550'. Acidized OH 2605-3183' w/4250 gals 15% NEFE acid, 750 gals xylene, 200 gals paraffin dispersant. POH w/pkr. Replaced wellhead. RIH w/compl assy, MA @ 3165', SN @ 3142'. RIH w/pump & rods. On 24 hr potential test 7/27/83 pmpd 4 BO, 4 BW, 5 MCFG, GOR 1250:1. Prior prod: 3 BO, 2 BW. Final Report.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Robert P. Lawrence TITLE Drlg. Engr. DATE 7/29/83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

AUG 15 1983

*See Instructions on Reverse Side

ROSWELL, NEW MEXICO