

N. M. O. C. C. COPY

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

<p>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.)</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. LC 031844</p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> P&A</p>		<p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p>
<p>2. NAME OF OPERATOR Atlantic Richfield Company</p>		<p>7. UNIT AGREEMENT NAME</p>
<p>3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240</p>		<p>8. FARM OR LEASE NAME Fren Oil Company</p>
<p>4. LOCATION OF WELL (Report location clearly and in accordance with any State law. See also space 17 below.) At surface 330' FNL & 330' FEL (Unit letter A)</p>		<p>9. WELL NO. 15</p>
<p>14. PERMIT NO.</p>		<p>10. FIELD AND POOL, OR WILDCAT Grayburg Jackson</p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4060' GR</p>		<p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 1, T17S, R31E</p>
<p>16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data</p>		<p>12. COUNTY OR PARISH Eddy</p>
<p>13. STATE N.M.</p>		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input 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.)*

Proposed plans to P&A have been completed and was done in the following manner.

2/19/74 - Loaded hole w/fresh water gel mud. Spotted 35 sx Class H cmt across 5 1/2" csg shoe @ 3755'. TOC @ 3450'. Spotted 20 sk cmt plug 2965-3140'. Cut 5 1/2" csg @ free point 2095' & pulled 67 jts of 5 1/2" 14# J-55 csg. Spotted 35 sx cmt plug @ 5 1/2" csg stub 2000-2150'. Spotted 35 sk cmt plug across 8-5/8" csg shoe 750-850'. Cut 8-5/8" csg @ 450', unable to circulate free. Backed off top 2 jts of 8-5/8" csg. Spotted cmt 30 sk cmt plug 70' to surface. Erected dry hole marker. Well P&A 2/22/74. Clean & level location. Your office will be notified when location is ready for inspection.

RECEIVED
MAR - 1 1974
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED *H. J. Burdick* TITLE Dist. Drlg. Supv. DATE 2/27/74

(This space for Federal or State office use)

APPROVED BY *H. J. Burdick* TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side