

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN THE
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1421.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC 029435 (a)
2. NAME OF OPERATOR Atlantic Richfield Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1978, Roswell, New Mexico 88201		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		8. FARM OR LEASE NAME J. L. Keel "A"
660' FSL & 660' FEL (Unit Letter P)		9. WELL NO. 6
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Grayburg-Jackson
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3708' GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7 T. 17S, R-31E
		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:		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 checked="" 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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(Other) Add Perforations

(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.)*

This well is beginning to show response to offset water injection. To prepare for this response, we propose to add Metex & Square Lake perforations w/one 3/8" jet shot at each depth 2843, 2847, 2848, 2898, 2899, 2900, 2901, 2903, 2942, 2944, 2946, 2947, 2965, 2967, 2969, 2971, 2973, 2974, 3030, 3032, 3034, 3046, 3048, 3049, 3096, 3098, 3100, 3102, 3104, 3108, 3110 & 3111'. Treat these perforations w/1000 gallons of 15% HCl acid and 30,000 gallons of slick fresh water containing 30,000# of 20/40 sand.

RECEIVED

SEP 24 1970

D. L. BEEKMEYER
ARTIFICIAL OFFICE

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

SIGNED

*D. L. Beeke*TITLE **Dist. Drlg. Supervisor**

DATE

9/21/70

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

A. L. Beeke
A. L. BEEKMEYER
ARTIFICIAL OFFICE

*See Instructions on Reverse Side