

DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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. WELL TYPE<br>OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> OTHER <input type="checkbox"/> | 2. NAME OF OPERATOR<br>ARCO Oil and Gas Company<br>Division of Atlantic Richfield Company | 3. ADDRESS OF OPERATOR<br>P. O. Box 1710, Hobbs, New Mexico 88240 | 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)<br>At surface<br>2200' FNL & 440' FWL | 5. WELL NO.<br>5 | 6. FIELD AND ZONE OR WILDCAT<br>Grayburg Jackson QGSA | 7. SEC., T., R., M. OR BLM. AND SURVEY OR AREA<br>18-17S-31E | 8. COUNTY OR PARISH<br>Eddy | 9. STATE<br>N.M. |
|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------|--------------------------------------------------------------|-----------------------------|------------------|

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O. C. D.  
ARTESIA, OFFICE

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

| NOTICE OF INTENTION TO |                      | SUBSEQUENT EFFORT OF |                 |
|------------------------|----------------------|----------------------|-----------------|
| DRILL WATER SHUT-OFF   | DRILL OR ALTER CASE  | WATER SHUT-OFF       | REPAIRING WELL  |
| WATER TREAT            | REPAIR OR ALTER CASE | FRAC BY TREATMENT    | ALTERING CASING |
| WATER TREAT            | ALTERING CASING      | ABANDONMENT*         |                 |

11. Recomplete in 7 Rivers X

12. TD 3539', PBD 2450'

13. 1. MIRU. POH w/rods & pump. NU BOP. POH w/tubing.  
2. Run GR-CNL CCL 2450-500'. Perforate Seven Rivers w/10 S<sub>1</sub> 1940-1980'.  
3. RIH w/FBRC pkr & spot 100 gals 15% NEFE HCL acid across perfs. PU, set pkr 100' above perfs. Pressure test annulus to 500#.  
4. Acidize Seven Rivers w/1000 gals 15% NEFE HCL. Swab test.  
5. POH w/pkr. RIH w/prod tbg, rods & pump. Return well to production.

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

SIGNED: *W.D. Daniel* TITLE: Dist Drlg Supt. DATE: 12/3/85

(This space for Federal or State office use)

APPROVED BY: *Mark Zeller* TITLE: *rit* DATE: 12-5-85

CONDITIONS OF APPROVAL IF ANY:

\*See Instructions on Reverse Side