

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

2/5F

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back into a different reservoir.  
Use "APPLICATION FOR PERMIT" or such other form as may be required.)

RECEIVED BY  
MAY 29 1986  
O.C.D.  
ARTESIA, OFFICE

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ WIW
2. NAME OF OPERATOR  
ARCO Oil and Gas Company - Div. of Atlantic Richfield Company
3. ADDRESS OF OPERATOR  
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.)  
At surface

990' FNL & 1384' FWL (Unit letter C)

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3763' DF

5. LEASE DESIGNATION AND SERIAL NO.  
LC 029548-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
C. A. Russell
9. WELL NO.  
6
10. FIELD AND POOL, OR WILDCAT  
Grayburg Jackson
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
18-17S-31E
12. COUNTY OR PARISH  
Eddy
13. STATE  
N.M.

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

NOTICE OF INTENTION TO:

- TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐  
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐  
SHOOT OR ACIDIZE ☐ ABANDON\* ☐  
REPAIR WELL ☐ CHANGE PLANS ☐  
(Other) ☐

SUBSEQUENT REPORT OF:

- WATER SHUT-OFF ☐ REPAIRING WELL ☐  
FRACTURE TREATMENT ☐ ALTERING CASING ☐  
SHOOTING OR ACIDIZING ☐ ABANDONMENT\* ☐  
(Other) ☒ Shut In X

(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.\*

SI casing & tubing. Well shut in effective 5/12/86 pending evaluation. Final Report.

APPROVED FOR 12 MONTH PERIOD  
ENDING 5/27/87

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

SIGNED J. W. King TITLE Area Prod Supt.

DATE 5/19/86

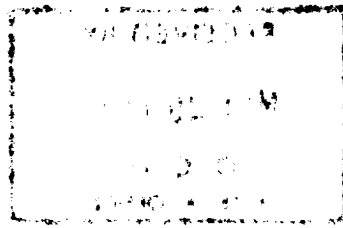
(This space for Federal or State office use.)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

DATE 5-27-86

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side



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1000000000 1000000000