

2/5F

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"/>		RECEIVED BY MAY 29 1986 O. C. D. ARTESIA OFFICE	5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR ARCO Oil and Gas Company Div. of Atlantic Richfield Company			LC 029395 A
3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 330' FNL & 660' FEL, Unit letter A			7. UNIT AGREEMENT NAME
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3675' DF	8. FARM OR LEASE NAME Turner A
			9. WELL NO. 12
			10. FIELD AND POOL, OR WILDCAT Grayburg Jackson
			11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 19-17S-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 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) <u>Shut In</u>	(Other) <input checked="" 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.)

On 4/07/86 well produced 1 BO, 2 BW & 0 MCFG.
Pumped 75 bbls corrosion inhibited water down casing, circ well for 5 hours. Shut in tubing, left casing open. Well shut in 5/11/86 pending engineering evaluation. Final Report.

APPROVED FOR ¹² MONTH PERIOD
ENDING 5/20/87

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

SIGNED <u>[Signature]</u>	TITLE <u>Area Prod Supt.</u>	DATE <u>5/14/86</u>
(This space for Federal or State office use)		
APPROVED BY <u>[Signature]</u>	TITLE <u></u>	DATE <u>5/27/86</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side