Form Approved. Form 9-331 Budget Bureau No. 42-R1424 Dec. 1973 UNITED STATES 5. LEASE NM 074936 DEPARTMENT OF THE INTERIOR 6. IF INDIAN, ALLOTTEE OR TRIBE NAME **GEOLOGICAL SURVEY** RECEIVED 7. UNIT AGREEMENT NAME 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 Form 9–331–C for such proposals.) 8. FARM OR LEASE NAME McIntyre Federal gas 1. oil well X well other 9. WELL NO. 2. NAME OF OPERATOR ARCO Oil & Gas Company Division of Atlantic Richfield Company FIELD OR WILDCAT NAME Loco Hills Morrow Gas 3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 17-17S-30E 1650' FSL & 1980' FWL (Unit Letter"K' 12. COUNTY OR PARISH 13. STATE AT SURFACE: AT TOP PROD. INTERVAL: New Mexico Eddy AT TOTAL DEPTH: As Above 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3660.1' GR REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* Run Intermediate & Cement (other) 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.)* Finished drlg 11" hole to 2652' 8-5-80. RIH w/ 8-5/8" OD 32# S-80 csg set @ 2652'. Cmtd 8-5/8" OD csg w/ 1050 sx pace setter Lite cmt contg 12# salt, 5#Gilsonite 14 cello seal/sk followed by 200 sx C1 "C" Neat. Circ 250 sx cmt to surf. PD @ 7:25 AM 8-6-80. WOC 18 hrs. Pressure tested casing to 1500# for 30 mins, OK. AUG 1 4 1980 U.S. GEOLUGICAL SURVEY ARTESIA, NEW MEXICO Subsurface Safety Valve: Manu. and Type ___ Set @ 18. I hereby certify that the foregoing is true and correct Dist. Drlg. Supt DATE 8/11/80 TITLE . (This space for Federal or State office use)

*See Instructions on Reverse Side

TITLE

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DATE

U.S. GEOLÓGICAL SURVEY ROSWELL, NEW MEXICO