

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions  
verse side)

Budget Bureau No. 1004-  
Expires August 31, 1985

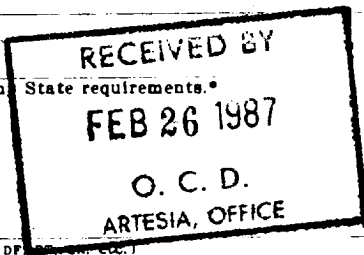
5. LEASE DESIGNATION AND SERIAL  
NM 0557371

6. IF INDIAN, ALLOTTEE OR TRIBE 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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME Empire Abo Press Maint.
2. NAME OF OPERATOR ARCO Oil and Gas Company	8. FARM OR LEASE NAME Empire Abo Unit "J"
3. ADDRESS OF OPERATOR P. O. Box 1610, Midland, Texas 79702	9. WELL NO. 17
4. LOCATION OF WELL (Report location clearly and in accordance with all State requirements. See also space 17 below.) At surface 660' FWL & 1980' FNL (Unit E)	10. FIELD AND POOL OR WILDCAT Empire Abo
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1-18S-27E	12. COUNTY OR PARISH Eddy
13. STATE NM	
14. PERMIT NO. 30-015-00704	15. ELEVATIONS (Show whether DFL or FNL) 3615 RKB



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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETION ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON\* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT\* ☒

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

(Other) ☐

(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.) \*

RU PU 1-20-87. P&A'd as follows:

Plug	Interval	Cmt	Remarks
1	5773-5910	150	CR @ 5773'. Abo Perfs 5875-5910'
2	3775-3900	20	Spot
3	1410-1530	20	Spot
4	0-100	20	Spot

Cut off WH. Install P&A marker. Well P&A'd 1-22-87.



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

915-688-5672

SIGNED Ken G. Gosnell

TITLE Engr. Tech. Spec.

DATE 2-19-87

(This space for Federal or State office use)  
Orig. Sgd. Under Authority

APPROVED BY Asst. Dir. Mgmt. Div.

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Approved as to plug job of the well bore.  
Liability under bond is retained until  
surface restoration is completed.

\*See Instructions on Reverse Side

Post ID-2  
2-27-87  
P&A