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G. C. D.

ARTESIAN OFFICE

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

NEW OIL & GAS COMMISSION

Drawer DD
Artesia, NM 88210Form Approved.
Budget Bureau No. 42-R1424

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.)

1. oil well ☒ gas well ☐ other ☐2. NAME OF OPERATOR ARCO Oil and Gas Company
Division of Atlantic Richfield Company ✓

3. ADDRESS OF OPERATOR

P. O. Box 1710, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 646.91' FNL & 666.71' FWL (unit D)

AT TOP PROD. INTERVAL: as above

AT TOTAL DEPTH: as above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☒(other) ☐

5. LEASE

LC-062412

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Empire Abo Pressure Maintenance Unit

8. FARM OR LEASE NAME

Empire Abo Unit "I"

9. WELL NO.

17

10. FIELD OR WILDCAT NAME

Empire Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

1-18-27

12. COUNTY OR PARISH 13. STATE

Eddy

N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3660' RDB

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Propose to P&A in the following manner: MIRU, NU BOP. POH w/tbg & WH. Run bit to PBD 5867'. Set cmt retr @ 5600'. Establish injection & cmt squeeze w/C1 H cmt, amt to be determined by pump-in rate. Pull out of retr, dump 5 sx cmt on top of cmt retr. Circ hole w/9.5 ppg BW cont'g 25#/bbl gel. Spot 100' cmt plugs 3500-3600', 1400-1500'. Spot 10 sx @ surf. Cut off WH. Install regulation dry hole marker. Clean & level location for abandonment.

Subsurface Safety Valve: Manu. and Type _____

Set @ _____

Ft.

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

SIGNED

A. L. Shackelford

TITLE Engrg Tech Spec.

DATE

7/24/85

(This space for Federal or State office use)

APPROVED BY

A. L. Shackelford

TITLE

DATE

11-14-85

CONDITIONS OF APPROVAL, IF ANY: