Form 3160-5
November 1983
(Formerly 9-331)

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

ASF

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.: 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.)

RECEIVED
JUL 11 1991
O. C. D.
ARTESIA, OFFICE

7. UNIT AGREEMENT NAME: EMPIRE ABO UNIT

WELL [ ] WELL [ ] OTHER

2. NAME OF OPERATOR: ARCO OIL AND GAS COMPANY

8. FARM OR LEASE NAME: EMPIRE ABO UNIT

3. ADDRESS OF OPERATOR: BOX 1710, HOBBS, NEW MEXICO 88240

9. WELL NO.: EMPIRE ABO UNIT "L" 18

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface

959.04
~~995.0~~4 FSL and 1644.42 FWL (UNIT LETTER N)

10. FIELD AND POOL, OR WILDCAT: EMPIRE ABO

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 1-18S-27E

14. PERMIT NO.: 30-015-00713

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

12. COUNTY OR PARISH: EDDY

13. STATE: NM

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 COMPLETE [ ]	FRACTURE TREATMENT [ ]	ALTERING CASING [ ]
SHOOT OR ACIDIZE [ ]	ABANDON* [ ]	SHOOTING OR ACIDIZING [ ]	ABANDONMENT* [ ]
REPAIR WELL [ ]	CHANGE PLANS [ ]	(Other) TEMPORARILY ABANDON	X
(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.)

HOLD WELL BORE FOR FIELD BLOW DOWN. WE REQUEST AN EXTENSION TO THE APPROVED TA PERMIT THAT EXPIRED 7/1/91.

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

SIGNED [signature] TITLE Administrative Supervisor DATE 7/3/91

(This space for Federal or State office use)

APPROVED BY [illegible] TITLE [illegible] DATE 7/9/91

CONDITIONS OF APPROVAL, IF ANY:

Subject to Like Approval by State

APPROVED FOR 12 MONTH PERIOD (minimum)
ENDING 7/1/92

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.