| •   | ÷  |  |   |                       |   | C15 F                             |  |
|---|--|--|---|-----------------------|---|-----------------------------------|--|
| Form 3160-5<br>June 1990)   | UNITED ST<br>DEPARTMENT OF   | TATES N.M C                                    | il Cua. Divi<br>1st Street<br>- nu. 88210-2 | SION Bu               | FORM APPROVED<br>adget Bureau No. 1004<br>Expires: March 31, 19 | -0135                             |  |
| Arte 38. No.  |  |  |   |                       | 5. Lease Designation and Serial No. NM0557371                   |                                   |  |
| Do not use this form  | SUNDRY NOTICES AND REF<br>for proposals to drill or to d<br>"APPLICATION FOR PERMI | PORTS ON WELLS<br>leepen or reentry to a diffe |   | 141103373             | an, Allottee or Tribe N   | arne                              |  |
| SUBMIT IN TRIPLICATE  |  |  |   |                       | 7. If Unit or CA, Agreement Designation 8910138010              |                                   |  |
| 1. Type of Well  X Oil Well  Gas Well  2. Name of Operator                                  | Other  |  | OF CELATED                                  |                       | lame and No. ABO UNIT L   | 18                                |  |
| ARCO Permian  |  | ——————————————————————————————————————         | RECEIVESIA<br>CO - ARTESIA                  | 9. API W              | 'ell No.  |                                   |  |
| P.O. Box 1089, E  |  | 505-394-1649                                   | •   | 30-015-               |   |                                   |  |
| 4. Location of Well (Footage.   | Sec., T., R., M., or Survey Description) FWL UNIT LETTER N                         |  | -   | EMPIRE                | ABO   | ry Area                           |  |
| SEC. 1,T18S,R27E  |  |  |   |                       | 11. County or Parish, State                                     |                                   |  |
| CHECK VE  | DDDDDDIATE DOV(*) TO   | INDICATE NATURE OF A                           | LOTIOE DEDOR                                | EDDY CO               |   | NM                                |  |
|   | PPROPRIATE BOX(s) TO   | INDICATE NATURE OF I                           | NOTICE, REPOR                               | I, OH OTHE            | ER DATA   |                                   |  |
| TYPE OF SUE   |  |  | TYPE OF ACTION                              | <u> </u>              |   |                                   |  |
| Notice of   | Intent   | Abandonment                                    |   |                       | ange of Plans   |                                   |  |
| X Subsequen   | t Report   | Recompletion                                   |   | r i                   | ew Construction   |                                   |  |
|   |  | Plugging Back Casing Repair                    |   |                       | on-Routine Fracturing ater Shut-Off                             |                                   |  |
| Final Abar  | ndonment Notice  | Altering Casing                                |   |                       | onversion to Injection  |                                   |  |
|   |  | X Other  | MIT   |                       | spose Water   |                                   |  |
|   |  |  |   | (Note: Re<br>Completi | eport results of multiple com-<br>ion or Recompletion Report    | pletion on Well<br>and Log form.) |  |
| 03/9/98: CSG MIT  | 080' PERFS: 6042-6056' PK<br>WITNESSED BY KEN LIVINST<br>PRESS TESTED TO 460#. HE  | ON - NMOCD, AND KENT                           | HART  |                       |   |                                   |  |
|   |  |  | OVED FOR                                    | 12 MOI<br>9-99        | NTH PERIOR  | 3                                 |  |
|   |  | ENDI   | <b>46</b>                                   |                       |   | •                                 |  |
|   |  |  |   |                       |   |                                   |  |
|   |  |  |   |                       |   |                                   |  |
| ,   |  |  |   |                       |   |                                   |  |
| 14. I hereby errify that the for  | regoing is true and correct  | Title Administrative A                         | ssistant                                    | Date                  | 03/16/98  | 4000                              |  |
| (This space for Federal or S<br>Approved by <b>(ORIG. S</b><br>Conditions of approval, if a | state office use)  GARY GOURLEY  any:  | Title PETROLEL                                 | IM ENGINEER                                 | Date                  |   | 7830                              |  |
|   |  |  |   |                       |   |                                   |  |

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