

NEW MEXICO OIL CONSERVATION COMMISSION

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NOTATION	1
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OFFICE	
OR	1

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-7244
7. Unit Agreement Name
8. Farm or Lease Name Hudson "B" State
9. Well No. 1
10. Field and Pool, or Wildcat Empire Yates 7 Rivers
12. County Eddy

SUNDRY NOTICES AND REPORTS ON WELL 5.
DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG OR TO ABANDON EXISTENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.

1. Name of Operator Atlantic Richfield Company
2. Address of Operator P.O. Box 1710, Hobbs, New Mexico 88240
3. Location of Well UNIT LETTER L 2310 FEET FROM THE South LINE AND 990 FEET FROM THE West LINE, SECTION 2 TOWNSHIP 18S RANGE 27E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) Unknown

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:	
REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input checked="" type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of completion, including any proposed work) SEE RULE 1103.

Propose to cancel notice of intention to P & A dtd 1-23-75. Propose to rig up swabbing unit and swab test open hole 390-414'. If well indicates commercial production capabilities will tubing, rods & pump and return to production.

18. I hereby certify that the information above is true and complete to the best of my knowledge.

SIGNED D. L. Shackelford

TITLE Accountant I

Date: 8-11-75

APPROVED BY W. A. Gressett

TITLE SUPERVISOR, DISTRICT II

DATE AUG 12 1975

CONDITIONS OF APPROVAL, IF ANY: