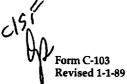
Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department



District Office			Revised 1-1-89
DISTRICT I	OIL CONSERVATION		
P.O. Box 1980, Hobbs NM 88241-1980	2040 Pacheco St. Santa Fe, NM 87505		WELL API NO. 30-015-00730
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Salita re, inivi	. 6/303	5. Indicate Type of Lease STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. B-7244
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" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name Empire Abo Unit "L"
1. Type of Well: OIL GAS WELL X WELL	OTHER		•
2. Name of Operator			8. Well No.
ARCO Permian			14
3. Address of Operator P.O. Box 1089 Eunice, NM 8	8231		9. Pool name or Wildcat Empire Abo
4. Well Location Unit Letter N : 660	Feet From The S	Line and 198	80 Feet From The W Line
2	100	275	F44.
Section 2	Township 18S Ra		NMPM Eddy County
		3539' GR	X////////////////////////////////
		lt .	ice, Report, or Other Data
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING		CASING TEST AND CE	
OTHER:		OTHER: TA & MIT	
12. Describe Proposed or Completed O work) SEE RULE 1103.	peration Clearly state all pertinent de	<u> </u>	dates, including estimated date of starting any propo
Load and test Notified NMOC	et @ 6017', Perforated inte ed wellbore. Pressured up D but did not witness test. are for future use and uphol	to 590#, 30 mins.	Chart attached.
Temporary A	Abandoned Status approved		RECEIVED OCD ARTESIA
until //-	27-02		E CONTRACTOR OF THE SECOND SEC
I hereby certify that the information above is	true and complete to use best of my knowle	edge and belief.	
SIGNATURE AULUS W. Y.	funish m	E Sr. Administrat	ive Assistant DATE 12/17/01
TYPE OR PRINT NAME Kellie D. Mur	rish		TELEPHONE NO. 505-394-1649
(This space for State Use)	X	_ Lild	Ap P 12 28-01
APPROVED BY	тп	E	DATE / J & 8 OT

