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NEW MEXICO RECEIVED DEPARTMENT OF MINES AND COMMISSION

DEC 7 1976

O.C.C.

ARTERIA, OFFICE

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

**SUNDY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR APPLICATION TO RILE OR TO RENEW OR RILE BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT - 17 (FORM C-101) FOR SUCH PROPOSALS.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-

2. Name of Operator  
Atlantic Richfield Company

3. Address of Operator  
P. O. Box 1710, Hobbs, New Mexico 88240

4. Location of Well  
UNIT LETTER G 2310 FEET FROM THE North LINE AND 1980 FEET FROM  
THE East LINE, SECTION 2 TOWNSHIP 18S RANGE 27E NMPM.

5a. Indicate Type of Lease  
State ☒ Fee ☐

5. State Oil & Gas Lease No.  
B-6869

7. Unit Agreement Name  
Empire Abo Pressure Maintenance Project

8. Form of Lease Name  
Empire Abo Unit "J"

9. Well No.  
15

10. Field and Pool, or Wildcat  
Empire Abo

12. County  
Eddy

15. Elevation (Show whether DF, RT, GR, etc.)  
3566' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

|                                                |                                           |                                                                           |                                               |
|------------------------------------------------|-------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------|
| NOTICE OF INTENTION TO:                        |                                           | SUBSEQUENT REPORT OF:                                                     |                                               |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                                    | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>                          | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input type="checkbox"/>                      |                                               |
|                                                |                                           | OTHER <u>SI-Allowable Transferred</u> <input checked="" type="checkbox"/> |                                               |

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

This well was shut-in on 9-19-76 after testing for 72 hrs. @ a stabilized rate of production to determine the transfer of allowable credit to other producing wells in the Empire Abo Pressure Maintenance Project area. This well is presently shut-in.

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

SIGNED [Signature] TITLE Sr. Dist. Prod. Supv. DATE 12-01-76

PROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE FEB 1 1977

CONDITIONS OF APPROVAL, IF ANY:

Expires 10-1-77