| orm 9-331   | UT ED STATES  | SUBMIT IN TRIP  |  |
|---|---|---|--|
| May 1963) DEP   | 5. LEASE DESIGNATION AND SEBIAL NO.   |   |  |
|   | GEOLOGICAL SURVEY   |   | IC-065478B   |
| CLINDDV   | NOTICES AND REPORTS O   | N WELLS   | 6. IF INDIAN, ALLOTTER OR TRIBE NAME   |
| (Do not use this form fo  | r proposals to drill or to deepen or plug in<br>PPLICATION FOR PERMIT—" for such pro-   | rk in a different reservoir.  |  |
| Use "A  | PPLICATION FOR PERMIT-" for such pro-   | DOMUS LE EIVER  | 7. UNIT AGREEMENT NAME   |
|   |   | 1 m -   | Empire Abo Pressure  |
| WELL X WELL 0   | THEB /  | APR - 2 1979  | <u>Maintenance Project</u><br>8. FARM OB LEASE NAME  |
| Atlantic Richfie  | Id Company  |   | Empire Abo Unit "J"  |
| ADDRESS OF OPERATOR   |   | 0. C. C.  | 9, WELL NO.  |
| P. O. Box 1710,   | Hobbs, New Mexico 88240   | ARTESIA, OFFICE   | <u>ala a 12 depe</u>   |
| LOCATION OF WELL (Report lo<br>See also space 17 below.)  | cation clearly and in accordance with any S   | state requirements.*  | 10. FIELD AND POOL, OR WILDCAT   |
| At surface  | Empire Abo<br>11. sec., T., E., M., OB BLK. AND   |   |  |
| 1980' FNL & 660'  | SURVEY OR AREA  |   |  |
|   | ·   |   | 3-18-27  |
| 4. PERMIT NO.   | 15. ELEVATIONS (Show whether DF,  | RT, GR, etc.)   | 12. COUNTY OR PARISH 13. STATE   |
|   | 3564' GR  |   | Eddy NM  |
| в. Ch   | eck Appropriate Box To Indicate No  | ature of Notice Report or   | Other Data   |
|   |   |   | QUENT REPORT OF  |
| NOTICE  | OF INTENTION TO:  | Г   |  |
| TEST WATER SHUT-OFF   | PULL OR ALTER CASING  | WATER SHUT-OFF  | ALTERING CASING  |
| FRACTURE TREAT  | ABANDON*  | FRACTURE TREATMENT  | ABANDON MENT*  |
| SHOOT OB ACIDIZE  | CHANGE PLANS  | (Other)   |  |
| (Other) Convert t   | O GIW   | Completion or Recon   | ts of multiple completion on Well<br>apletion Report and Log form.)                          |
|   |   | details, and give pertinent date  | es, including estimated date of starting any<br>ical depths for all markers and zones perti- |
| <ol> <li>voidage and improved</li> <li>Rig up, kill</li> <li>Run CBL.</li> <li>Perf 5-1/2" of</li> <li>Install high</li> <li>RIH w/internation coated tbg, se</li> <li>Fill 2-3/8" of</li> <li>Test well for FE acid/Xylet</li> </ol> | ect in order to increase grove oil recovery in the pro-<br>well, POH w/comp assy, instant<br>csg @ TOC as determined by<br>press injection well head<br>ally plastic coated Lok se<br>set pkr @ 5520'.<br>k 5-1/2" csg annulus w/2%<br>r injectivity. Acidize if<br>ne.<br>ad & commence gas injectio | oducing wells.<br>stall BOP.<br>log & circ cmt to<br>& test.<br>t pkr on 2-3/8" OD<br>KCL & corrosion inh<br>necessary w/5000 g | surf i ternally plastic<br>EUE internally contacts<br>ibitor.                                |
| 8. I hereby certify that the fo   | pressing is true and correct  |   |  |
|   |   | ist. Drlg. Supt.  | 3-26-79  |
| SIGNED ALLON  |   |   |  |
| (This space for Federal pr  |   |   |  |
| APPROVED BY   |   | ACTING DISTRICT ENGI  | NEER 3 DATE MAR 30 1979  |
| CONDITIONS OF APPROV<br>Surgect cto   | Like approval y   | hom the M.  |  |
| v   | *San Instruction  | s on Reverse Side   | 994R X 288   |
|   | Jee manuchun  |   |  |
|   |   |   |  |
|   | •   |   |  |

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ATLANTIC RICHFIELD COMPANY Blow Out Preventer Program

Lesse 'Name Empire Abo Unit "J"

Well No.

| Location | 1980  | FNL   | &   | 660 | FEL, | Section                            | 3,                     |
|----------|-------|-------|-----|-----|------|------------------------------------|------------------------|
|          | T-188 | 5, R- | -27 | Έ   |      | در منی خود <b>امنیا اور د</b> ارد. | ر بر رو بر من معر بر ا |

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BOP to be tested before installed on well and will be maintained in good working condition during drilling. All wellhead fittings to be of sufficient pressure to operate in a safe manner.

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