

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
811 S. 1st Street
Artesia, NM 88210-2834

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

ARCO Permian

3. Address and Telephone No.

P.O. Box 1710 Hobbs, N.M. 88240

505-391-1649

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit Letter P, 660' REL & 660' FEL
Sec. 3 - T18S, R27E

5. Lease Designation and Serial No.

NM025604

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8910138010

8. Well Name and No.

EMPIRE ABO UNIT L 12

9. API Well No.

30-015-00757

10. Field and Pool, or exploratory Area

EMPIRE ABO

11. County or Parish, State

EDDY

NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE/REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other _____
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

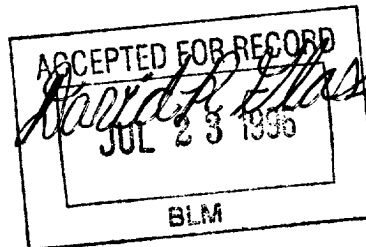
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD: 6108' PBS: 6011' PERFS: 5950-5980', NEW PERFS @ 5810-5910'

06/19/96: PERF ABO INTERVAL FROM 5810-5910, 2 JSPF.

06/20/96: ACIDIZED PERFS 5810-5910' W/3500 GALS ACID USING 192 BALL SEALERS.



RECEIVED
JUL 22 12 07 PM '96
CARLE AREA OFFICE

14. I hereby certify that the foregoing is true and correct

Signed

Kevin H. Munn

Title ADMINISTRATIVE ASSISTANT

Date 07/18/96

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

* See Instruction on Reverse Side