

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(Other instructions on reverse side)

NM OIL CONS. COMMISSION

Drawer DD

5. LEASE DESIGNATION AND SERIAL NO.

NM 029135

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS NM 88210

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		<div style="border: 2px solid black; padding: 5px; text-align: center;"> RECEIVED BY SEP 11 1985 O. C. D. ARTESIA OFFICE </div>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR ARCO Oil and Gas Company Div of Atlantic Richfield Company				8. FARM OR LEASE NAME Empire Abo Unit "L"	
3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240				9. WELL NO. 6	
4. LOCATION OF WELL (Report location clearly and in accordance with any state requirements. See also space 17 below.) At surface 2310' FWL & 430' FSL (Unit letter N)				10. FIELD AND POOL, OR WILDCAT Empire Abo	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3573' DF		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 4-18S-27E	
				12. COUNTY OR PARISH Eddy	
				13. STATE N.M.	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Testing Downhole Equipment ☒

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

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

17. 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.) *

RU 6/3/85. Loaded csg w/corrosion inhibited water, Pressure tested casing to 500# for 30 mins, OK. Ran 1 jt 2-3/8" OD EUE tbg, inst 2" gate valve @ surf. Well TA eff: 6/3/85. Holding for future development.

APPROVED FOR 12 MONTH PERIOD

ENDING

9/10/86

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

SIGNED

L. Shackelford

TITLE

Engrg Tech. Spec.

DATE

9/5/85

(This space for Federal or State office use)

APPROVED BY

Artesia

TITLE

DATE

9-9-85

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side