

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR
(Other instructio
verse side)

CATE*
OD re

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

C171

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—" for such proposals.)

RECEIVED

NOV 20 '89

O. C. D.
ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO.

LC 061783 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

EMPIRE ABO UNIT "K"

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

EMPIRE ABO

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

4-18S-27E

12. COUNTY OR PARISH

EDDY

13. STATE

NM

1. OIL ☒ GAS ☐ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

ARCO OIL AND GAS COMPANY

3. ADDRESS OF OPERATOR

BOX 1710, HOBBS, NEW MEXICO 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1650' FEL and 330' FEL (Unit Letter I)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3580' RDB

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) CASING INTEGRITY TEST

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

XX

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

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.)

On 6/1/76 a CLBP was set at 5300'

Procedure:

1. Notify BLM and NMOCD 24 hrs prior to testing casing.
2. The casing will be filled with fluid and pressure tested to 500 psi for 15 minutes with a 10% allowable for leak-off (I.E. 450 psi).
3. Submit a subsequent report on Sundry Notice w/chart attached.

RECEIVED

NOV 21 1989

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

SIGNED

TITLE Services Supervisor

DATE 10/27/89

(This space for Federal or State office use)

APPROVED BY Orig. Signed by Agent, State, or
CONDITIONS OF APPROVAL, IF ANY:

PETROLEUM ENGINEER
TITLE

DATE 11-13-89

*See Instructions on Reverse Side