Form	3150-5
(June	1990)

## NITED STATES

FORM APPRO	VED
Budget Bureau No.	1004-013
Bruine, March 8	1 1000

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BUREAU OF LAND MANAGEMENT  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  X ON OLL AND GAS COMPANY  3. Address and Telephone No. P.O. BOX 1719 HOBBS, NEW MEXICO 88240  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  1.569 FSL & 330 FEL UNIT LETTER I  SEC. 4, T18S, R27E  11. Consty or Parial, States  EDDY CO. NM  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Abandonment  Recompletion  Recompletion  Abandonment  Recompletion  Plugging Back  Non-Routine Fracturing  Water Shart-Off  Convertion to Injection  Dispose Water  Other  Dispose Water  Other  Dispose Water  Dispose Water  Dispose Water  Other  Dispose Water  Dispose Water  Dispose Water  Dispose water of testing completion as Well  Convertion to Empirica on Well  Convertion to Empirica o	(June 1990)	DEPARTMEN	IT OF THE INTERIOR	Budget Bureau No. 1004-0135 Expirus: March 31, 1993
Do not use this form for proposals to drill or to deepen or recentry to a different reservoir.  Use "APPLICATION FOR PERMIT"." For such proposals  SUBMIT IN TRIPLICATE  1. The wall State of Operators  SUBMIT IN TRIPLICATE  2. Name of Operators  1. Well Case Case Case Case Case Case Case Case		BUREAU OF	LAND MANAGEMENT	
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		SUNDRY NOTICES AN	D REPORTS ON WELLS	LC 061783 A
SUBMIT IN TRIPLICATE  1. Type of Well  1. Type of Well  2. Name of Operation  2. Name of Operation  3. All one of Operation  3. All one of Operation  3. All one of Operation  4. Location of Well (Rodge, Sec., T. R. M., or Survey Description)  1. Sec. 4, T18S, R77E  1. Complete R. D. R. Type of Plant and Pool, or organization of Well (Rodge, Sec., T. R. M., or Survey Description)  1. Sec. 4, T18S, R77E  1. Complete R. D. R. Type of Plant and Pool, or organization or Well (Rodge, Sec., T. R. M., or Survey Description)  1. Sec. 4, T18S, R77E  1. Complete R. D. R. Type of All (Rodge, Sec., T. R. M., or Survey Description)  1. Sec. 4, T18S, R77E  1. Complete R. D. R. Type of All (Rodge, Sec., T. R. M., or Survey Description)  1. Sec. 4, T18S, R77E  1. Complete R. D. R. Type of All (Rodge, Sec., T. R. M., or Survey Description)  1. Sec. 4, T18S, R77E  1. Complete R.	Do not i			6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE  7. If Using or CA. Agreement Designation 891013881  1. Type of Wold		- <del>-</del>	- · · · · · · · · · · · · · · · · · · ·	
SUBMIT IN TRIPLICATE    Type of Wel				7. If Unit or CA, Agreement Designation
Notice of Linear   Notice   Notice of Linear   Notice   Notice of Linear   Notice		SUBMIT	IN TRIPLICATE	
2. Marco of Operator ARCO OFIL AND GAS COMPANY  3. Address and Telephone No. P.O. BOX 1719 HOBBS, NEW MEXICO 88240  4. Location of Well (Todage, Sec., T. R. M. or Survey Description) 1649 PSL & 330 PEL UNIT LETTER I  SEC. 4. TIRS, R27E  11. Control or Pure Interest Interes				7
ARCO OIL AND GAS COMPANY  3. Address and Telephone No. P.O. BOX 1776 BIOBBS, NEW MEXICO 88246  4. Loncine of Well (Frontage, Sec. T. R. M. or Survey Description)  16.97 FSL 330 FEL UNIT LETTER I  11. COHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  13. Subsequent Report  14. Indicate the subsequent Report  15. Final Abandonnest Notice  16. Final Abandonnest Notice  17. Describe Proposed or Completed Operations (Clearly state all portiones details, and give professed that of making contents to liquidion in Voil 19. Describe Proposed or Completed Operations (Clearly state all portiones details, and give professed that of making completion in Voil 19. Describe Proposed or Completed Operations (Clearly state all professes details, and give professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all markets and floors professes to subservibed bottom and innacred and from vertical depths for all mar	X Oil	Gas Well Other		8. Well Name and No.
3. Address and Telephone No. P.O. BOX 1718 BIODBS, NEW MEXICO 88246 S.D. BOX 1718 BIODBS, NEW MEXICO 88246 10. Feld as Pool, or exploratory Area EMPRIE ABO 11. County or Purish, State EDDY CO. NM 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION  Notice of latest  X. Subsequent Report Plagsing Back Non-Rootine Fracturing Water State-Off Chaing Repair Coversion to Injection  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of surring my proposed work. If well is directionally drille give subsurface locations and measured and tree vertical depths for all markers and soose pertinent dates, including estimated date of surring my proposed work. If well is directionally drille give subsurface locations and measured and tree vertical depths for all markers and soose pertinent dates, including estimated date of surring my proposed work. If well is directionally drille give subsurface locations and measured and tree vertical depths for all markers and soose pertinent dates, including estimated date of surring my proposed work. If well is directionally drille give subsurface locations and measured and tree vertical depths for all markers and soose pertinent dates, including estimated date of surring my proposed work. If well is directionally drille give subsurface locations and measured and tree vertical depths for all markers and soose pertinent dates, including estimated dates of surring my proposed work. If well is directionally drille give subsurface locations and measured and tree vertical depths for all markers and soose pertinent dates, including estimated dates of surring my proposed work. If well is directionally drille give subsurface locations and measured and tree vertical depths for all markers and soose pertinent dates, including estimated the estimated by the proposed work. If well is directionally drille give subsurface locations and proposed work in well a		-		
P.O. BOX 1716 BIOBRS, NEW MEXICO 88240 (595) 391-1662  1. Location of Well (Footage, Sec., T. R. M., or survey Description) 1.859 FSL 330* FEL UNIT LETTER I  1. Commy or Parish, Same  EDDY CO. NM  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Notice of Inited  Notice of Inited  Recompletion  Now Construction  Now Construction  Now Restrict Findering  Water State Off  Controlling Box  Water State Off  Converting to Inited  Recompletion  Planging Box  Water State Off  Converting to Inited  Converting to Inited  Recompletion  Report Water State Off  Converting to Injection  Dispose Water  State  Office Hamburghan Institute of material and give performed date, including estimated date of marriage may proposed work. If well is directionally drille  PERFS: 5582' TO 5552', CIRP @ 5380'  PERFS: 5582' TO 5552', CIRP @ 5380'  Recompleted Operations (Clearly inter all performed depths for all marriers and zones performed date, including engineers to Institute to I			ν	
4. Location of Well (Poolage, Sec., T., R. M., or Survey Descriptions)  16.59 FSL & 330 FEL UNIT LETTER I  SEC. 4, T18S, R27E  20 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF SUBMISSION  Abandonment  Recompletion  Notice of Inless  Recompletion  Rec		-	10 (505) 391-1602	
11. County or Purish, State  EDDY CO. NM  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Notice of Inless  X Subsequent Report  Plaging Back Costing Repair  Chair Repair  Aberdonment Notice  Chair Repair  Conversion to Injection or Notice (Startly state all pertinent details, and give pertinent datas, including estimated date of starting stry proposed work. If well is directionally drille give subsurface locations and incurred and true vertical depths for all manefers and zones pertinent to this work.)*  PERFS: 5502' TO 5552', CIBP @ 5300'  HOLD WELLBORG FOR FIELD BLOWDOWN, CHART ATTACHED BU3/09/25 (SS MIT WITHESSED BY GARY WILLIAMS FOR NMOCD MIT EVERY FIVE YEARS IN ACCORDANCE TO NMOCD RULE 263  APPROVED FOR  APPROVED F				
SEC. 4, T18S, R27E    EDDY CO.   NIM		· · · · · · · · · · · · · · · · · · ·	and the second	
TYPE OF SUBMISSION  TYPE OF ACTION    Notice of Interest				11. Souly & 1212, 522
TYPE OF SUBMISSION    Notice of Intent				EDDY CO. NM
TYPE OF SUBMISSION    Notice of Intent	12	CHECK APPROPRIATE BOX(s	TO INDICATE NATURE OF NOTICE REPORT	C OR OTHER DATA
Notice of lateral			T	- CK OTHER DATA
Recompletion   New Construction   New Report   New R		TYPE OF SUBMISSION	TYPE OF ACTION	
Subsequent Report		Notice of Intent	Abandonment	Change of Plans
Casing Repair   Water State-Off   Convenion to Injections   Convenion of metals completed on Water   Convenion to Injections   Convenion to Inject		(v)	Recompletion	New Construction
Abering Casing    Convertion to Injection   Dispose Water		Subsequent Report	Plugging Back	Non-Routine Fracturing
Altering Custing    Conversion to Injection   Conversion to Dispect Water			Casing Repair	Water Shut-Off
Observable 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 two vertical depths for all markers and toose pertinent to this work.)  PERFS: 5502' TO 5552', CIBP @ 5300' HOLD WELLBORE FOR FIELD BLOWDOWN, CHART ATTACHED @3/30/92 CSG MIT WITNESSED BY GARY WILLIAMS FOR NMOCD MIT EVERY FIVE YEARS IN ACCORDANCE TO NMOCD RULE 263  APPROVED FOR			1 = 1	
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 drille give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)  PERFS: 5502' TO 5552', CIBP @ 5300' HOLD WELLBORE FOR FIELD BLOWDOWN, CHART ATTACHED 03/30/32' CSG MIT WITNESSED BY GARY WILLIAMS FOR NMOCD MIT EVERY FIVE YEARS IN ACCORDANCE TO NMOCD RULE 203  APR 2 6 1995  OIL CON. DIV.  THE APPROVED FOR			Other TEMPORARILY ABANDON	
PERFS: 5502' TO 5552', CIBP @ 5300' HOLD WELLBORE FOR FIELD BLOWDOWN, CHART ATTACHED @33092' CSG MIT WITNESSED BY GARY WILLIAMS FOR NMOCD MIT EVERY FIVE YEARS IN ACCORDANCE TO NMOCD RULE 203  APR 2 6 1995  OIL CON. DIV.  APPROVED FOR				Completion or Recompletion Report and Lor form.)
OIL CON. DIV.  THE APPROVED FOR 12 MONTH PERIOD  ENDING 3/30/96  14. I bereby certify that the foregoing is true and correct  Signed 500 Marchin Tale OPERATIONS COORDINATOR  OPERATIONS COORDINATOR  OPERATIONS COORDINATOR  Date 4/24/95  Approved by ORIG. SSD.) JOE C. LARA Title PETROLEUM ENGINEER  Date 4/24/95	is. Describe Pi	roposed or Completed Operations (Clearly state a ve subsurface locations and measured and true ver	tical depths for all markers and zones pertinent to this work.)*	•
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14. I bereby certify that the foregoing is true and correct Signed Down which Title OPERATIONS COORDINATOR  (This space for Federal or State office use)  Approved by OPERATIONS TITLE OPERATIONS COORDINATOR  Date 4/24/95				333
14. I bereby certify that the foregoing is true and correct Signed Down which Title OPERATIONS COORDINATOR  (This space for Federal or State office use)  Approved by OPERATIONS TITLE OPERATIONS COORDINATOR  Date 4/24/95			OIL COM	000
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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.