

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

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JUN 2 1980

O. C. D.
ARTESIA, OFFICE

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 Form 9-331-C for such proposals.)

1. oil ☐ well gas ☐ well other ☐ Water Injection Well
2. NAME OF OPERATOR ARCO Oil & Gas Company, Division of Atlantic Richfield Company
3. ADDRESS OF OPERATOR
P O. Box 1710, Hobbs, New Mexico 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2240' FSL & 400' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: As Above
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

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

SUBSEQUENT REPORT TO:

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

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U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Propose to plug a water injection well in the West Red Lake Unit area. The water-flood has become uneconomical and there are no other prospects for the well.

1. Rig up, kill well, install BOP & POH w/injection assy.
2. RIH w/5½" cmt retr, set retr @ 1500'.
3. Cmt squeeze San Andres perms 1683-1774' w/150 sx Cl C w/2% Ca Cl. Spot 5 sx cmt (50') on top of retr.
Blowout Preventer Program attached.
4. RIH w/5½" cmt retr & set @ 875'.
5. Cmt squeeze Grayburg perms 1090-1124' w/45 sx Cl C Cmt w/2% CaCl. Spot 31 sx cmt (300') on top of retr.
6. Run CBL fr 500' to surf.
7. Perforate 5½" csg above TOC as indicated from CBL.
8. Circulate cmt down 5½" csg & up thru 8-5/8" x 5½" csg annulus w/Cl C cmt w/2% Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED George H. Stewart TITLE Dist. Drlg. Supt. DATE 2-20-80

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

MAY 21 1980