

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYN. M. O. C. C. COPY  
SUBMIT IN TR  
(Other instructio  
verse side)  
DATE\*  
on re-Form approved.  
Budget Bureau No. 42-R1424.

## 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. LC 070678 (a)
2. NAME OF OPERATOR Atlantic Richfield Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 1710 - Hobbs, New Mexico 88240	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  660' FSL & 330' FEL (Unit Letter P)	8. FARM OR LEASE NAME Empire Abo Unit "p"
14. PERMIT NO.	9. WELL NO. 4
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3492' DF	10. FIELD AND POOL, OR WILDCAT Empire Abo
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 8-18S-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)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

Shut-in Allowable Transferred X  
(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.)\*

The above well was shut-in on October 1, 1973. The well was shut-in because it was a high COR well. Allowable transferred under NMOCC Orders R-4548, R-4549, R-4549-A R-4549-B

RECEIVED

OCT 21 1975

O. C. C.  
ARTESIA, OFFICE

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

SIGNED

TITLE Dist Prod &amp; Drlg Supt

DATE 9-26-75

(This space for Federal or State office use)

TITLE

DATE

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

OCT 20 1975

L. L. BEEKMAN

ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side