

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPlicate
(Other instruction
verse side)

Budget Bureau No. 1014-01
Expires August 31, 1985

3 LEASE DESIGNATION AND SERIAL NO

8910138010

6 IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

MAY 15 1992

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

EMPIRE ABO UNIT "N"

9. WELL NO.

701

10. FIELD AND POOL, OR WILDCAT

EMPIRE ABO

11. SEC., T., S., M., OR BLK. AND
SUBST OR AREA

SEC. 9, T18S, R28E

12. COUNTY OR PARISH 13. STATE

EDDY

NM

OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

ARCO OIL AND GAS COMPANY

O. C. D.
APPROX. OFFICE

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

1980 FNL - 1980 FEL (UNIT LETTER G)

14. PERMIT NO

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

30-015-00846

3547' RDB

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

NOTICE OF INTENTION TO:

TEST WATER SHUT OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON

REPAIR ABO

CHANGE PLANT

(Other)

B. SEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT

(Other) TEMPORARILY ABANDON

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

17. DESCRIPTION OF OPERATIONS OR COMPLETION OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any production work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this report.)

HOLD WELL BORE FOR FIELD BLOW DOWN

PERFS: 5496-5622' ; CIBP @ 5450'

3/31/92 CSG INTEGRITY TEST, LOAD WELL BORE w/8.6# BRINE w/WT-675 CHEMICAL, PRESSURE UP TO 500#, AND HOLD 30 MINS. TEST WITNESSED AND CHARTS INITIALED BY GARY WILLIAMS (NMOCD).

IN ORDER TO MINIMIZE PAPER WORK AND CONFUSION, WE REQUEST A 5 YEAR PERMIT TO COINCIDE WITH THE NMOCD RULE 203 AND ITS 5 YEAR TA PERIOD.

CHART ATTACHED.

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

SIGNED

TITLE Operations Coordinator

DATE 4/9/92

(This space for Federal or State office use)

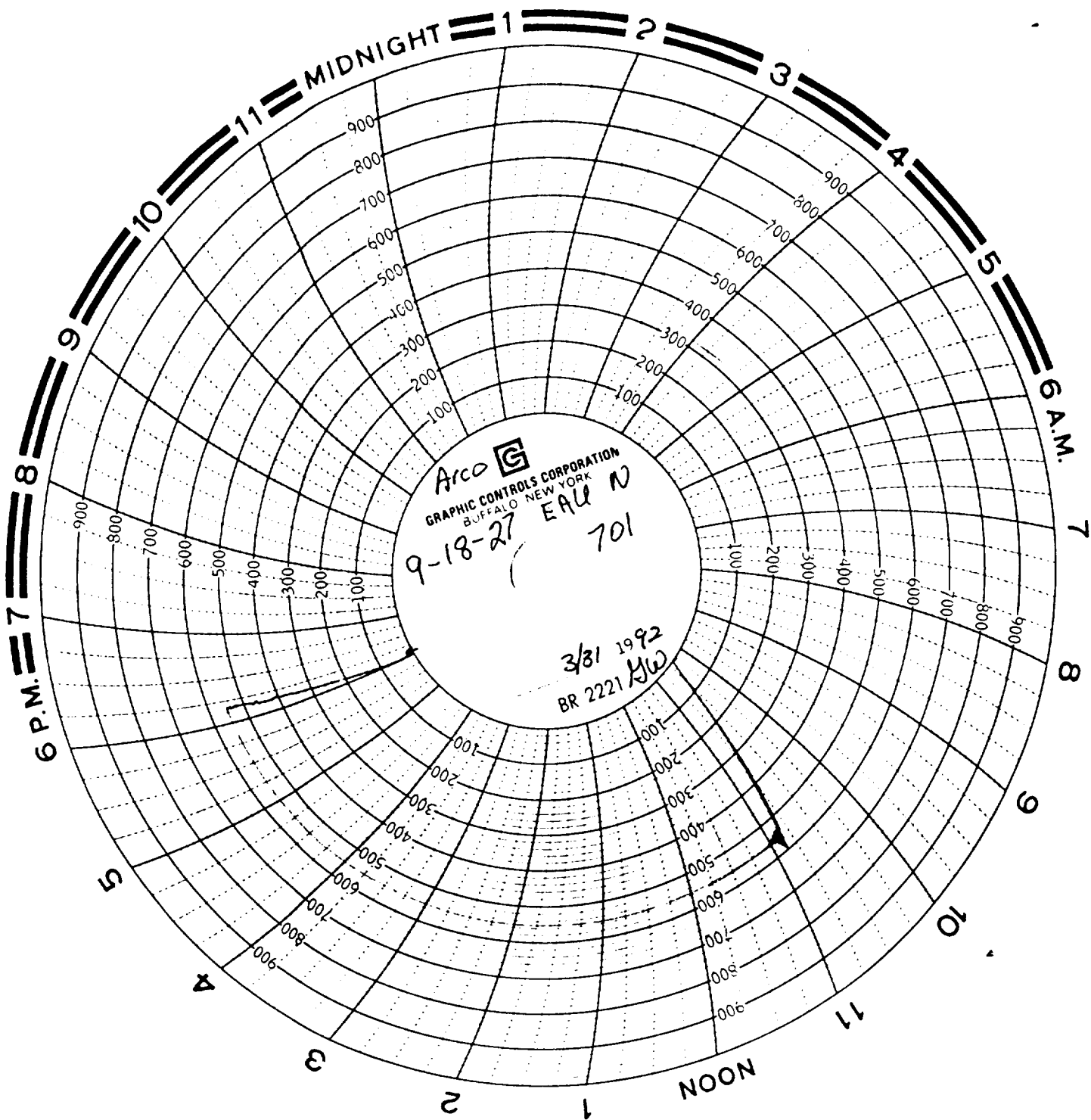
APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side



Arco G
GRAPHIC CONTROLS CORPORATION
BUFFALO NEW YORK

9-18-27
EAL N
701

3/31 1992
BR 2221 JLD

