N.M. Oi Gree Division **UNITED STATES** Artesia No Budget Bureau No. 1004-0135 Form 3160-5 DEPARTMENT OF THE INTERIOR Expires: March 31, 1993 (June 1990) **BUREAU OF LAND MANAGEMENT** 5. Lease Designation and Serial No. LC 065478 B SUNDRY NOTICES AND REPORTS ON WELLS 6. If Indian, Allottee or Tribe Name 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 7. If Unit or CA, Agreement Designation SUBMIT IN TRIPLICATE 8910138010 1. Type of Well 8. Well Name and No. X Oil EMPIRE ABO UNIT 2. Name of Operator 1/ ARCO Permian 9. API Well No. 3. Address and Telephone No. 30-015-00856 505-394-1649 P.O. Box 1089, Eunice, NM 88231 10. Field and Pool, or exploratory Area 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) EMPIRE ABO 1650' FNL & 2310 FEL UNIT LETTER G 11. County or Parish, State SEC. 10, T18S, R27E CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF ACTION TYPE OF SUBMISSION Change of Plans Notice of Intent Abandonment New Construction Recompletion Subsequent Report Plugging Back Non-Routine Fracturing Water Shut-Off Casing Repair Final Abandonment Notice Conversion to Injection Altering Casing MIT Dispose Water Other . (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) 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 drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

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TD: 6173' PBD: 5985' PERFS: 5925-5977' CIBP: 5899'

3/25/99: CSG MIT WITNESSED BY KEN LIVINSTON - NMOCD, AND KENT WHITMIRE - ARCO. PRESS TESTED TO 520#. HELD 15 MINS. HELD OK. CHART ATTACHED.

Title Administrative Assistant (This space for Federal or State office use) DAVID R. GLASS, itle Approved by

Conditions of approval, if any:

