

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS. COMMISSION
Brewer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

ARCO OIL & GAS COMPANY

3. Address and Telephone No.

P.O. BOX 1710 HOBBS N.M. 88240

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

UNIT LETTER E, 1880 FNL & 660 FWL SEC. 10, T185, R27E

5. Lease Designation and Serial No.

NM0250604 025604

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8910138010

8. Well Name and No.

EMPIRE ABO UNIT "N" 9

9. API Well No.

30-015-00859

10. Field and Pool, or Exploratory Area

EMPIRE ABO

11. County or Parish, State

EDDY, N.M.

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other REMEDIAL
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(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.)*

TD 6000, PBD 5959, PERFS 5900-50

4-7-93 ACIDIZE PERFS 5900-50 W/3000 GALS 60/40 ACID/XYLENE, W/TECHN/-WET-425

FLUSH W/25 BLC

4/15/93 IN 24 HRS. PUMPED 35 BO, 11 BW, 48 MCFG

J. Lara
28 1993

RECEIVED
MAY 3 8 25 AM '93
CARLISLE
AREA OFFICE

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

Signed

Title OPERATIONS COORDINATOR

Date 4/29/93

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

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.

*See Instruction on Reverse Side