

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TR
(Other instructi
verse side)CATE
on reForm approved,
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM 025604

6. IF INDIAN, ALLEGED 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.)

1. OIL ☒ GAS ☐ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR ARCO PRODUCTION COMPANY	8. FARM OR LEASE NAME MALCO G. Fernald
3. ADDRESS OF OPERATOR BOX 43, HOBBS, N. M. 88240	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND NAME, OR WILDCAT EMPIRE 960
14. PERMIT NO. 1650 FNLx 1650 FNL Sec. 10 (Unit F. BELM NW 1/4)	11. SECT. T. R. S. OR B. K. AND SECTION AND AREA 10-18-77 NMNM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3501' R. D. B.	12. COMPLETION METHOD EDM N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT RECOMPLETION	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	FRACTURE TREATMENT	☒
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☒
REPAIR WELL	☐	(Other)	☐
(Other)	☐	(Other)	☐

(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.)

Well frequently dies. In an effort to improve productivity acidized perforations 5830-70' w/3000 gal 15%. Evaluated and restored to production.

Pres - Flow 112 BDX 4 BW 24 hrs. GOR 1061.
After - Flow 354 BDX 0 BW 24 hrs. GOR 870.

TD - 6061'
PDD - 5940'
4 1/2" CSA 6061'.
PERF - 5830-70' 4 1/2" ISPF.

OC - 2-12-71
COMP - 2-14-71

RECEIVED

FEB 17 1971

J. S. GORDON
ARTESIA, NEW MEXICO

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

SIGNED

TITLE AREA SUPERINTENDENT

DATE FEB 16 1971

(This space for Federal or State office use)

APPROVED BY

TITLE

RECEIVED

DATE

FEB 19 1971

D. C. C.
ARTESIA, OFFICE

ACCEPTED FOR RECORD PURPOSES
FEB 18 1971
Date
ACTING District Engineer

*See Instructions on Reverse Side