

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
311 S. 1st St. N
Alameda, 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 Permian

3. Address and Telephone No.

P.O. Box 1089, Eunice, NM 88231

505-394-1649

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

UNIT LETTER M, 986' FWL & 330' FWL
SEC. 10-T18S-R27E

3. Lease Designation and Serial No.

NM025604

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8910138010

8. Well Name and No.

EMPIRE ABO UNIT

P-9

9. API Well No.

30-015-00862

10. Field and Pool, or exploratory Area

EMPIRE ABO

11. County or Parish, State

EDDY

NM

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 TEMPORARILY ABANDONED
☐ 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: 5958' PBD: 5780' PERFS: 5749-5769' CIBP: 5709'

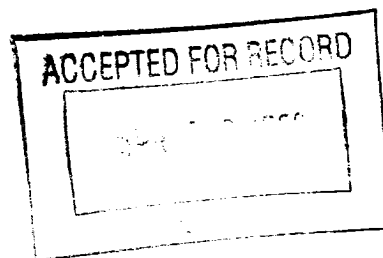
HOLD WELLBORE FOR FIELD BLOWDOWN CHART ATTACHED

05/20/94 CSG MIT FOR NMOC

MIT EVERY FIVE YEARS IN ACCORDANCE TO NMOC RULE 203

APPROVED FOR 14 MONTH PERIOD
ENDING 5/20/99

(ORIG. SGD.) GARY GOURLEY



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

Signed

[Signature]

Title Administrative Assistant

Date 03/10/98

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

RECEIVED

MAR 11 1968

U.S. DEPT. OF AGRICULTURE
BUREAU OF LAND MANAGEMENT

MAR 11 1968

BLM
ROSWELL, NM

DAY

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