

CLSF

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

RECEIVED
JUN 22 1993

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
ARCO Oil and Gas Company

3. Address and Telephone No.
P.O. Box 1710 - Hobbs, New Mexico 88241-1710

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
(Unit B)
660' FNL & 1980' FEL, Section 11, T18S, R27E

O. C. D.
APPROVED

5. Lease Designation and Serial No.
LC 067858

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
8910138010

8. Well Name and No.
Empire Abo Unit "M" #15

9. API Well No.
30-015-00868

10. Field and Pool, or Exploratory Area
Empire Abo

11. County or Parish, State
Eddy County, New Mexico

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other <u>Temporarily Abandon</u>	<input type="checkbox"/> 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 6260', PBD 6212', Perfs 6138-6158'

MIRU Scanalog OH. RIH w/CIBP and set at 6119.84'. Load casing w/8.6# brine packer fluid. Test casing to 500# for 30 minutes. OK.

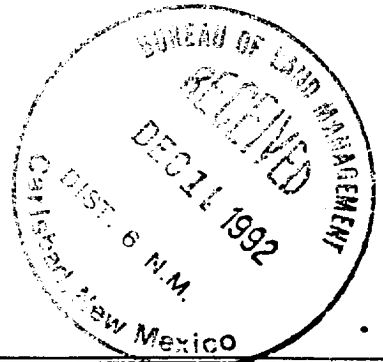
Witnessed by J. Robinson - NMOCD

Well TA 12/04/92

APPROVED FOR 12 MONTH PERIOD

01-01-94

Chart Attached



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

Signed [Signature] Title Operations Coordinator Date 12/11/92

(This space for Federal or State office use)
Approved by [Signature] Title PETROLEUM ENGINEER Date 1-7-93

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.

