

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

**OIL CONSERVATION DIVISION**

**DISTRICT I**  
P.O. Box 1980, Hobbs NM 88241-1980

**DISTRICT II**  
P.O. Drawer DD, Artesia, NM 88210

**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.  
30-015-00899

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
E-3635

**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"  
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name  
EMPIRE ABO UNIT "S"

1. Type of Well:  
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator  
ARCO Permian

8. Well No.  
7

3. Address of Operator  
P.O. Box 1089 Eunice, NM 88231

9. Pool name or Wildcat  
EMPIRE ABO

4. Well Location  
Unit Letter F 2304' Feet From The S Line and 2310' Feet From The E Line

Section 16 Township 18S Range 27E NMPM EDDY COUNTY County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3444' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: MIT ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

PBD: 5690' PERFS: 5646-5656

03/9/98: CSG MIT WITNESSED BY KEN LIVINGSTON - NMOCD, AND KENT  
WHITMIRE - ARCO. PRESS TESTED TO 470#. HELD 15 MINS. HELD OK. CHART  
ATTACHED.

MAR 2000  
RECEIVED  
OCD - ARTESIA

This Approval of Temporary  
Abandonment Expires 2003

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kellie D. Murrish TITLE Administrative Assistant DATE 03/16/98

TYPE OR PRINT NAME Kellie D. Murrish TELEPHONE NO. 505-394-1649

(This space for State Use)

APPROVED BY

Ken Livingston OIL AND GAS INSPECTOR

DATE

3-31-98

CONDITIONS OF APPROVAL, IF ANY: