Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 30-015-02553

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No.

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 "I"

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

RECEIVED
MAR 29 1991
O. C. D.
ARTESIA, OFFICE

2. Name of Operator: ARCO OIL & GAS COMPANY

8. Well No. 30

3. Address of Operator: BOX 1710, HOBBS, NEW MEXICO 88240

9. Pool name or Wildcat: EMPIRE - ABO

4. Well Location
Unit Letter C : 330 Feet From The NORTH Line and 1675 Feet From The WEST Line

Section 4 Township 18S Range 28E NMPM EDDY County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3671' DF

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [X]	CHANGE PLANS [ ]	COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]		CASING TEST AND CEMENT JOB [ ]	
OTHER: [ ]		OTHER: [ ]	

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.

TA & HOLD WELL BORE FOR FIELD BLOW DOWN

1. Notify NMOCD 24 hrs. prior to testing CIBP
2. MIRU
3. Unset PKR or TAC
4. Install BOP & GIH to tag PBTD
5. POH w/TBG, TOH
6. GIH w/TBG or WL set CIBP
7. Set CIBP maximum 50' above existing PERFS
8. POH w/1 Jt. & circ a mix of 2 gal WT675 chem. per 10 bbls 8.6# brine
9. When circulation is established, w/ treated fluid at surface, test CIBP to 500# and cut chart.
10. POH, laying down - leave 1 Jt. hanging on BI Bonnett

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

SIGNATURE [signature] TITLE Administrative Supervisor DATE March 11, 1991

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY [signature] TITLE Field Rep DATE 4/2/91

CONDITIONS OF APPROVAL, IF ANY:

Notify NMOCD [illegible] Test CIBP