

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN THE
(Other instructions
on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

IC 029395 b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Turner "B" (B)

9. WELL NO.

50

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

29-T17S-R31E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Water Injection Well2. NAME OF OPERATOR
ATLANTIC RICHFIELD COMPANY3. ADDRESS OF OPERATOR
P. O. Box 1920, Hobbs, New Mexico 882404. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

660' fr North line and 660' fr West line

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3626' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☒ Converted to WTWREPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

X

(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.) *

3-11-69 Set C.I.B.P. @ 3295' w/2 sks. cement on top. PBTD 3285'. - Ran 2-3/8" OD EUE tubing and tension packer set @ 3170'. Preparing to inject water into Premier Perforations 3208-3224' Russell-Turner Waterflood Area.

RECEIVED

RECEIVED

MAR 17 1969

MAR 18 1969

O. C. C.
ARTESIA, TEXAS

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

SIGNED

TITLE Superintendent

DATE March 13, 1969

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

Orig & cc: USGS, Artesia

cc: Southern Region (West Texas)

cc: file

*See Instructions on Reverse Side

APPROVED

MAR 17 1969

R. L. BECKMA