

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN 1  
(Other Instruct. on re-  
verse side)Form approved, Cap  
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

LC 029395 - b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Turner "B" (B)

9. WELL NO.

55

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson

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

29-T17S-R31E

1.

OIL  
WELL☐GAS  
WELL☐

OTHER

Water Injection Well

2. NAME OF OPERATOR

ATLANTIC RICHFIELD COMPANY

3. ADDRESS OF OPERATOR

P. O. Box 1920, Hobbs, New Mexico 86240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

660' fr East line and 1980' fr North line

14. PERMIT NO.

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

3763' GR

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

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 WTW

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

☐  
☐  
☐☐  
☐  
☐  
☒(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 perti-  
nent to this work.)\*3-11-69 Ran 2-3/8" OD BUE tubing w/tension packer set @ 3405'. Preparing to inject  
water into Premier perms. 3455-3555' Russell-Turner Waterflood Area.

RECEIVED

MAR 12 1969

U. S. G. S.  
ARTESIA, NEW MEXICO

RECEIVED

MAR 17 1969

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Orig&amp;Acc: USGS, Artesia

cc: Southern Region (West Texas)

cc: file

\*See Instructions on Reverse Side

APPROVED  
MAR 17 1969  
R. C. BECKMAN