

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)Form approved,  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 070937

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 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—" for such proposals.)1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Atlantic Richfield Company

3. ADDRESS OF OPERATOR

P. O. Box 1710, Hobbs, New Mexico 86240 6 1974

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

O. C. C.

ARTESIA, OFFICE

330' FSL &amp; 987.2' FWL (Unit letter M)

14. PERMIT NO.

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

3553' RDB

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Empire Abo Unit L

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Empire Abo

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

4-18S-27E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

## 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) Shut in. Allowable Transferred

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 pertinent to this work.)\*

The above well was shut in on October 1, 1973. This well was shut in because it was a high GOR well. Allowable transferred under NMOCC orders R-4548, R-4549, R-4549-A, R-4549-B. Also holding for secondary recovery.

RECEIVED

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

SIGNED

TITLE Dist. Prod. &amp; Drlg. Supt.

DATE October 31, 1974

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

UNLESS FURTHER APPROVED, WELL MUST  
BE PUT TO BENEFICIAL USE OR PLUGGED BY  
APRIL OCTOBER 1 - 1975

DATE

\*See Instructions on Reverse Side

APPROVED

DEC 5 - 1974

K. L. BEEKMAN  
ACTING DISTRICT ENGINEER