

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

SEP 10 1992

FORM APPROVED
Budget Bureau No. 1004-0135
Expires September 10, 1990

SUNDRY NOTICES AND REPORTS ON WELLS U. C. D.

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT--" for such proposals

SUBMIT IN TRIPLICATE

1. TYPE OF WELL ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. NAME OF OPERATOR
ARCO Oil & Gas Company

3. ADDRESS AND TELEPHONE NO.
P.O. Box 1610, Midland, TX 79702 (915) 688-5672

4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description)
953 FSL & 2197 FEL (Unit Letter O)
1-18S-27E

5. LEASE DESIGNATION AND SERIAL NO.
NM016788

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. IF UNIT OR CA, AGREEMENT DESIGNATION

8. WELL NAME AND NO.
Empire Abo Unit "L" #19

9. API WELL NO.
30-015-00388

10. FIELD AND POOL, OR EXPLORATORY AREA
Empire Abo

11. COUNTY OR PARISH, STATE
Eddy Co., NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> NOTICE OF INTENT	<input checked="" type="checkbox"/> ABANDONMENT	<input type="checkbox"/> CHANGE OF PLANS
<input checked="" type="checkbox"/> SUBSEQUENT REPORT	<input type="checkbox"/> RECOMPLETION	<input type="checkbox"/> NEW CONSTRUCTION
<input type="checkbox"/> FINAL ABANDONMENT NOTICE	<input type="checkbox"/> PLUGGING BACK	<input type="checkbox"/> NON-ROUTINE FRACTURING
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> ALTERING CASING	<input type="checkbox"/> CONVERSION TO INJECTION
	<input type="checkbox"/> Other	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

3. 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.)

12-30-91 RUPU. POH w/CA. P&A'd as follows:

Plug	Interval	Cmt	Remarks
1	6045-6216	100sx	CR at 6080 w/35' cmt on top. Displaced hole w/10# MLF
2	3450-3900	35 sx	Spot
3	1300-2200	70 sx	Spot
4	640-900	20 sx	Spot
5	0-100	10 sx	Spot

Cut off wellhead & instali dry hole marker. P&A'd 1-2-92.

Part ID-2
9-18-92
P&A

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

SIGNED Kenau Gosnell TITLE Regulatory Coordinator DATE 8-21-92

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 9/8/92
CONDITIONS FOR APPROVAL, IF ANY:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.