

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

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

WELL API NO. 300152154300	
5. Indicate Type of Lease STATE ☒ FEE ☐	
6. State Oil & Gas Lease No. B-7244	
7. Lease Name or Unit Agreement Name Empire Abo Unit	
8. Well No. I-141	
9. Pool name or Wildcat Empire Abo	

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.)

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Gas Injection
2. Name of Operator ARCO OIL AND GAS COMPANY
3. Address of Operator P.O. 1710 HOBBS N.M. 88240

4. Well Location Unit Letter <u>N</u> : <u>1050</u> Feet From The <u>South</u> Line and <u>1360</u> Feet From The <u>West</u> Line Section <u>2</u> Township <u>18S</u> Range <u>37E 27</u> NMPM Eddy County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3516.4 GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ PULL OR ALTER CASING ☐ OTHER: ☐	SUBSEQUENT REPORT OF: REMEDIAL WORK ☐ ALTERING CASING ☐ COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐ CASING TEST AND CEMENT JOB ☐ OTHER: <u>Convert to Gas Injection</u> ☒

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.

10/23/93: MIRU
 10/25/93: POH with pkr & CA. RU wireline, RIH w/4" csg gun perf abo 6032-6106' w/2 JSPF, 58 holes. RD wireline.
 10/29/93: RIH w/pkr & tbq. Set pkr @ 6027' w/11,000# compression. Test csg to 500# for 20 mins. Pressure test chart attached.
 11/1/93: Swabbed well flowing to frac tank.
 11/2/93: Install choke and open on 48/64" choke. Pending gas injection.

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

SIGNATURE James Cogburn TITLE OPERATION COORDINATOR DATE 12/30/93
 TYPE OR PRINT NAME JAMES COGBURN TELEPHONE NO. 391-1621

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY RAY SMITH TITLE OIL AND GAS INSPECTOR DATE FEB 01 1994
 CONDITIONS OF APPROVAL, IF ANY:

