

Submit 3 Copies
to Appropriate
District Office

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2008

RECEIVED

JUN 26 1992

O. C. D.

WELL API NO.

30-015-21544

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 "L"

8. Well No.

151

9. Pool Name or Wildcat

Empire Abo

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR 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

2. Name of Operator

ARCO OIL and GAS COMPANY

3. Address of Operator

P.O. Box 1610, Midland, Texas 79702

4. Well Location

Unit Letter O : 1110 Feet From The South Line and 1322 Feet from The East Line

Section 2

Township 18S

Range 27E

NMPM Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3554.4 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) ☐

12. Describe Proposed or completed Operation (Clearly state all pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

5-20-92. RUPU. RIH w/bit TOC at 6088. DO cmt & CR at 6089. DO cmt f/6089-6140. Set CIBP at 6140. Perf Abo f/6100-6120. A w/2900 gals. Flow test. RIH w/CA: Lok-set pkr on 2-3/8 tbg set at 6077. Press test csg to 500#.

5-26-92. RDPU.

Remedial work unsuccessful. Holding wellbore for BHP monitoring.

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

SIGNATURE

Ken W. Gosnell

TITLE

Regulatory Coordinator

DATE

6-24-92

TYPE OR PRINT NAME

Ken W. Gosnell

TELEPHONE

(915) 688-5672

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

JUL 17 1992

CONDITIONS FOR APPROVAL, IF ANY: