

NMOCG COPY

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRII
(Other instruction
verse side)

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Form approved
Budget Bureau No. 42-R1424.

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

Box 1710, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

2490' FNL & 1299' FEL (Unit letter H)

14. PERMIT NO.

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

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) Squeeze Perfs & Complete

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

Lower in Abo

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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.)*

1. Rig up, kill well, install BOP, POH W/compl assy.
2. Squeeze Abo perfs 6141-6161' w/LWL cmt.
3. Drill out cmt to 6270' & run CBL.
4. Perforate Abo 6250-6260' w/2JSPF.
5. Treat perfs 6250-6260' w/150 gal 15% HCL-LSTNE acid w/FE agent, 1000 gal gelled 10 PPG CaCl wtr, 1000 gal gelled lease crude, 1500 gal 15% HCL-LSTNE acid w/FE agent, flush w/lease crude.
6. Swab back load & return to production.

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

SIGNED

TITLE Dist. Drlg. Supt.

DATE

3/6/79

(This space for Federal or State office use)

APPROVED BY

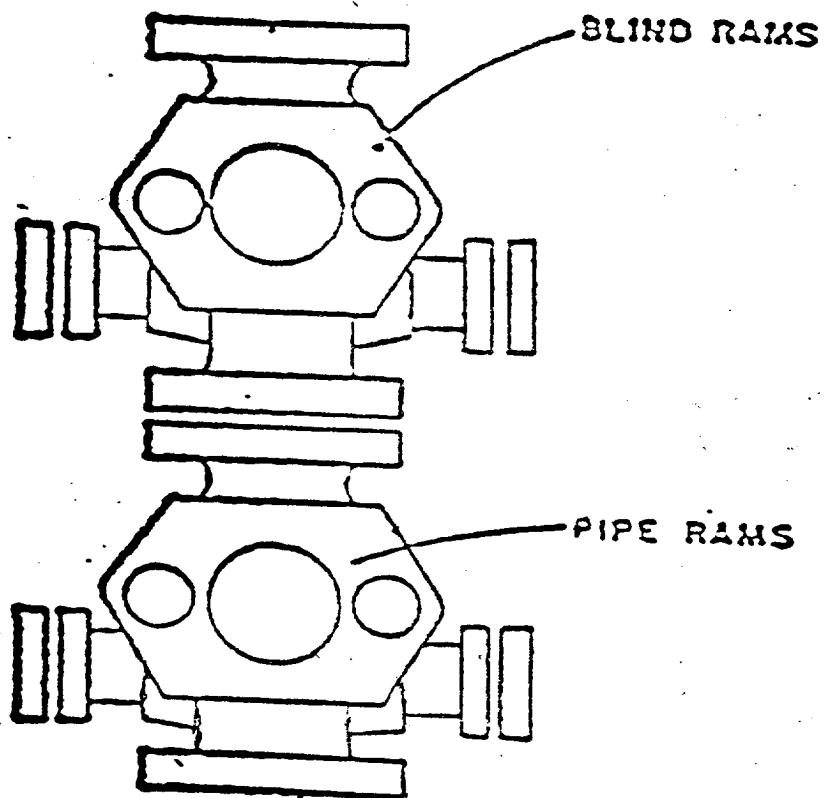
TITLE ACTING DISTRICT ENGINEER

DATE

MAR 13 1979

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side



ATLANTIC RICHFIELD COMPANY
Blow Out Preventer Program

Lease Name Empire Abo Unit "J"

Well No. 202

Location 2490' FNL & 1299' FEL
Sec 1-18-27, Eddy County

BOP to be tested before installed on well and will be maintained in good working condition during drilling. All wellhead fittings to be of sufficient pressure to operate in a safe manner.