

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS. COMMISSION
BUDGET BUREAU NO. 1004-0135
EXPIRES: MARCH 31, 1993

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

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

RECEIVED

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other **GAS INJECTION**

2. Name of Operator

ARCO OIL AND GAS CO. ✓

3. Address and Telephone No.

P.O. 1710 HOBBS, NM 88240

391-1621

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2370 FWL & 1533 FSL (UNIT K) SEC 1, T 18S, R27E

5. Lease Designation and Serial No.

NM 05557371

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8910138010

8. Well Name and No.

EMPIRE ABO UNIT "K" 182

9. API Well No.

30-015-21792

10. Field and Pool, or Exploratory Area

EMPIRE ABO

11. County or Parish, State

EDDY, NM

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

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other _____
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☒ Conversion to Injection
☐ Dispose Water

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

13. 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.)*

TD 6369, PBD 6287, PERFS DRAIN HOLE 6232-6539

NOTIFY BLM & NMOCD PRIOR TO STARTING WORK

SET PKR @ 6180, LOAD CSG W/TREATED FLUID, TEST CSG TO 500# FOR 30 MIN, AND START INJECTION

Subject to
Like Approval
by State

SEP 20 9 23 AM '93

RECEIVED

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

Signed

Title OPERATION COORDINATOR

Date 9-17-93

(This space for Federal or State office use)

Approved by

(OPIC SGD) JOE G. LARA

Title

PETROLEUM ENGINEER

Date

10/13/93

Conditions of approval, if any: