Form 3160-5 (June 1990)	UNITED STA DEPARTMENT OF TH BUREAU OF LAND M	IE INTERIOR Artesia, NI	COMMISSION FORM APPROVED CS Budget Bureau No. 1004-0135 Expires: March 31, 1993 3. Lease Designation and Serial No.
Do not use this form for	NDRY NOTICES AND RE or proposals to drill or to d APPLICATION FOR PERMI	leepen or reentry to a different	R 2 3 10 A NM 0557371 6. If Indian, Allottee or Tribe Name reservoir.
	SUBMIT IN TRIF	PLICATE	7. If Unit or CA, Agreement Designation
I. Type of Well Oil Gas	8910138010		
Oil Gas Well Well Docher Gas injection well 2. Name of Operator			8. Well Name and No. Empire Abo Unit K-182
ARCO Oil and Gas	s Company		9. API Well No.
3. Address and Telephone No. P.O. Box 1710, Hobbs, NM 88240 (505)391-1649			<u>30-015-21792</u> 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Empire Abo
2370' FWL & 1533' FSL Unit K, Section 1, T18S, R27E			11. County or Parish, State
onic k, section	1, 1105, KZ/E		Eddy, NM
2. CHECK APPF	ROPRIATE BOX(s) TO IN	DICATE NATURE OF NOTIC	E, REPORT, OR OTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION			DF ACTION
Notice of Intent			Change of Plans
Subsequent Repo	~	Recompletion Plugging Back	
		Casing Repair	Non-Routine Fracturing Water Shut-Off
Final Abandonm	ient Notice	Altering Casing	Conversion to Injection
		Other	
13. Describe Proposed or Completed give subsurface locations an	Operations (Clearly state all pertinent deta d measured and true vertical depths for a	ails, and give pertinent dates, including estimate all markers and zones pertinent to this work.)	d date of starting any proposed work. If well is directionally drilled.
TD 6339' PBD	6223' PERFS 6223	-6539'	
Load	csg/tbg annulus and	w/TH377 Chemical. Set pressure up to 500#, h tnessed by Johnnie Robi	Pkr @ 6193' w/11,000# compressi eld for 30". Pressure Test nson NMOCD.
,	F (2) = 2 (2)	MAR 2 1 1994	- LEIVED FEB 25 1994 CO DIST. 6 N.M. 150397, New Mexico
14. I hereby certify that the foregoin	g is true and correct		
Signed KUCLART	in hunder T	ide Records Clerk II	Date02/24/94
(This space for Federal or State of	office use)		
Approved by Conditions of approval, if any:	т	ide	Dete
	it a crime for any aerson knowingly and	willfully to make to any department or agence	y of the United States any false, fictitious or fraudulent statements

