

UNITED STATES OF AMERICA
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP
(Other instruction
reverse side)ATE
1 reForm 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Empire Abo Pressure Maintenance Project	
2. NAME OF OPERATOR Atlantic Richfield Company		8. FARM OR LEASE NAME Empire Abo Unit "K"	
3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240		9. WELL NO. 191	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1526' FSL & 1470' FEL (Unit letter J)		10. FIELD AND POOL, OR WILDCAT Empire Abo	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1-18S-27E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3627.4' GR		12. COUNTY OR PARISH Eddy	
		13. STATE N.M.	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Spud, Run Surf Csg & Cmt, <input checked="" type="checkbox"/>	

(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.) *

Spudded 11" hole @ 5:45 PM 8/27/76. Drld to 1000' @ 10:00 PM 8/28/76. RIH w/8-5/8" OD 24# K-55 new csg. Set csg @ 1000'. Cmtd 8-5/8" OD csg w/300 sx Cl C cmt cont'g 4% gel, 2% CaCl, 1#/sk celloflake, 6# salt/sk & 5#/sk Gilsonite, followed by 100 sx Cl C cmt cont'g 6# salt/sk & 2% CaCl. PD @ 1:10 AM 8/29/76. TOC behind 8-5/8" OD csg @ 22' from surf. WOC 8 hrs. Filled 11" X 8-5/8" annulus w/5 yds redi-mix to surf. WOC 4 hrs. The surface csg was cmtd in accordance w/Option 2 of Rule 107 of the NMOCC Rules & Regulations. The following criteria is furnished for cmtg by Option 2:

1. Volume of cmt slurry was 567 cu ft of Cl C cmt cont'g 4% gel, 2% CaCl, 1#/sk celloflake, 6# salt/sk & 5#/sk Gilsonite followed by 189 cu ft Cl C cmt cont'g 6#/sk salt & 2% CaCl. Filled 11" X 8-5/8" annulus 22' to surf w/178 cu ft of redi-mix cmt.
2. Approximate temperature of cmt slurry when mixed was 83° F.
3. Estimated minimum formation temperature in zone of interest was 70° F.
4. Estimate of cmt strength @ time of csg test was 1600 PSI.
5. Actual time cmt in place prior to starting test was 12 hrs.

Pressure tested csg to 1000# for 30 mins, OK. Resumed drlg 7-7/8" hole @ 1:15 PM 8/29/76.

RECEIVED

SEP 09 1976

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE Dist. Drlg. Supv.

DATE 9/8/76

(This space for Federal or State office use)

APPROVED BY

TITLE DISTRICT ENGINEER

DATE SEP 9 1976

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side