

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)Form approved
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

NM-016788

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Empire Abo Pressure
Maintenance Project

8. FARM OR LEASE NAME

Empire Abo Unit "K"

9. WELL NO.

191

10. FIELD AND POOL, OR WILDCAT

Empire Abo

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

1-18S-27E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

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 ☐

RECEIVED

2. NAME OF OPERATOR

Atlantic Richfield Company

OCT 3 1978

3. ADDRESS OF OPERATOR

P. O. 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

ARTESIA, OFFICE

1526' FSL & 1470' FEL (Unit letter J)

14. PERMIT NO.

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

3627.4' GR

18. 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)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Squeeze Cmt & Compl Lower in ReefX

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.) *

RU, killed well, inst BOP & POH w/tbg & pkr. RIH w/FB cmtr on 2-3/8" tbg, set @ 6086'. Press tested csg & BP 6086-6130' w/2500# OK. POH w/FB cmtr. RIH w/cmt retr, set retr @ 6002', tstd csg to 1000# OK. Squeezed perfs 6056-66' by pmpg 200 bbls 10# brine gel wtr, 50 BLC, 100 bbls injectrol G, 8.4#/gal, 100 sx Cl C cmt cont'g 6# sd/sk. RO 5 sx cmt. WOC. RIH w/bit, drld retr @ 6002', cmt 6002-6033'. Press tested csg to 1550# 30 mins OK. Drld CIBP @ 6130', circ hole clean to 6278'. RIH w/Lok-set pkr, set pkr @ 6095'. Acidized perfs 6154-6172' w/500 gals 15% HCL 60/40 & xylene, flushed w/18 BLC. Swbd 24 BO & 136 BW. POH w/Lok-set pkr & tbg. RIH w/pkr, Kobe cavity on 2-3/8" OD tbg, set tbg @ 6111', pkr @ 6109' & Kobe cavity @ 6196-6109'. On 24 hr potential test 9/10/78 pmpd Abo perfs 6154-72', 101 BO, 19 BW & 140 MCFG. GOR 1386:1. Final Report.

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

SIGNED

TITLE

Dist. Drlg. Supt.

DATE 9/27/78

(This space for Federal or State office use)

APPROVED BY

TITLE

ACTING DISTRICT ENGINEER

DATE

OCT - 2 1978