

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP!
(Other instructions
verse side)

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Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

25F

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.)

RECEIVED

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR
ARCO OIL AND GAS 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
1300' FNL and 1220' FWL (Unit Letter D)

NOV 20 '89

O. C. D.

ARIZONA, *OFFICE

5. LEASE DESIGNATION AND SERIAL NO.
NM 025604
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
EMPIRE ABO PRESSURE
MAINTENANCE PROJECT
8. FARM OR LEASE NAME
EMPIRE ABO UNIT "M"
9. WELL NO.
901
10. FIELD AND POOL, OR WILDCAT
EMPIRE ABO
11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
10-18S-27E
12. COUNTY OR PARISH
EDDY
13. STATE
NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) CASING INTEGRITY TEST ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
(Other) ☐

(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.)

On 9/8/80 a RBP was set at 5915'

Procedure:

1. Notify BLM and NMOCD 24 hrs prior to testing casing.
2. The casing will be filled with fluid and pressure tested to 500 psi for 15 minutes with a 10% allowable for leak-off (I.E. 450 psi).
3. Submit a subsequent report on Sundry Notice w/chart attached.

RECEIVED

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

SIGNED James D. Gish

TITLE Services Supervisor

DATE 10/27/89

(This space for Federal or State office use)

Orig. Signed by Adam Delamach

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE PETROLEUM ENGINEER

DATE 11-13-89

*See Instructions on Reverse Side