

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE  
(Other instructions  
reverse side)

Budget Bureau No. 1-04-01  
Expires August 31, 1985  
LEASE DESIGNATION AND SERIAL NO.  
8910138010  
IF INDIAN, ALLOTTEE OR TRIBE NAME

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

APR 16 1992

O. C. D.  
SPECIAL OFFICE

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

990 FNL - 1300 FEL (UNIT LETTER A)

14. PERMIT NO.

30-015-22098

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

3499.9' GL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

EMPIRE ABO UNIT "M"

9. WELL NO.

122

10. FIELD AND POOL, OR WILDCAT

EMPIRE ABO

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

SEC. 10, T18S, R27E

12. COUNTY OR PARISH 13. STATE

EDDY

NM

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

NOTICE OF INTENTION TO

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON\* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT\* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) TEMPORARILY ABANDON ☒

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

17. DESCRIBE NOTICE OR COMPLETE OPERATION. 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.

HOLD WELL BORE FOR FIELD BLOW DOWN & MONITOR BHP

PERFS: 5918-5928'; PKR @ 5797'

3/31/92 CSG INTEGRITY TEST, LOAD WELL BORE w/8.6# BRINE w/WT-675 CHEMICAL, PRESSURE UP TO 500#, AND HOLD 30 MINS. TEST WITNESSED AND CHARTS INITIALED BY GARY WILLIAMS (NMOCD).

IN ORDER TO MINIMIZE PAPER WORK AND CONFUSION, WE REQUEST A 5 YEAR PERMIT TO COINCIDE WITH THE NMOCD RULE 203 AND ITS 5 YEAR TA PERIOD.

CHART ATTACHED.

APPROVED FOR 12 MONTH PERIOD

ENDING 3/30/93

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

SIGNED

TITLE Operations Coordinator

DATE 4/9/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE 4-15-92

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

