

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form 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 "M"	
3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240		9. WELL NO. 151	
4. LOCATION OF WELL (Report location and in accordance with any State regulations. See also space 17 below.) At surface 400' FNL & 1450' FEL (Unit Letter "B")		10. FIELD AND POOL, OR WILDCAT Empire Abo	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 11-18S-27E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3604.1' GR		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

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) DST, Log, Run & cmt prod. csg. Completion or Recompletion Report and Log form.)

Perf & Comp.

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 08/13/78 reached depth of 5500', ran magnetic multishot directional survey-horizontal displacement=92.15 feet @ North 36 deg. 30 mins West (true). Finished drlg 7-7/8" hole to 6310' @ 8:15 AM 08/19/78. Ran GR-DLL w/RXO & GR-N, CNL-FDC-Cal w/cal, GR-Sonic-VDL logs. DST #1. Abo 6143-6168'. No wtr cushion, straddle-open hole inflatable. OT @ 5:56 AM 08/21/78. TO for 5 mins, closed chamber test .016 PSI, closed tool for 50 mins, press. 1.320 PSI on teleflow. No flow, no press, pulled pkr loose. DST #2 Abo 6195'-6220'. No wtr cushion, straddle-open hole inflatable. OT @ 7:24 AM 08/21/78. TO for 7 mins, closed chamber test. .175 PSI, closed tool for 11 mins, press .273 PSI on teleflow. No flow, no press. pulled pkr loose. DST #3. Abo 6090-6115'. No wtr cushion, straddle-open hole inflatable. OT @ 8:11 AM 08/21/78, TO for 15 mins, closed chamber test, .208 PSI. Closed tool for 90 mins, press 0 PSI on teleflow. No flow, no press. Pulled pkr loose. POH w/test tools, rec 120' slightly gas cut mud. RIH w/5 1/2" OD 15.5# K-55 csg set @ 6310'. Pengo pkr tool set @ 6143-6178'. DV tool @ 3999'. Ran GR-Corr log. Ran setting tool to FC & set tool pkrs, POH w/setting tools. Cmt 5 1/2" OD csg 1st stage w/25 BFW, 10 bbl. Sam Spacer, 25 BFW, 260 sx Hal-Lite cmt contg 10# 20/40 sd & 5# 100 mesh sd, 200 sx Cl"C" Thik-set w/2% CaCl. Opened SC @ 3999' & circ 35 bbls cmt. Cmt 2nd stage thru DV tool w/900 sx Hal Lite cmt contg 8# salt/sk & 100 sx Cl"C" contg 8# salt/sk. PD @ 5:10 PM, circ 105 sx cmt to pit. WOC 72 hrs. WIH w/bit, drld SC @ 3999'. Press tested csg to 1500# for 30 mins. OK. Tagged cmt @ 6031' & DO to 6230', tagged btm PBD @ 6239'. Ran CBL. Perf 6150-65' w/2 JSPF. RIH w/Lok-set pkr on 2-3/8" tbg, set pkr @ 6063'. Acidized Abo perfs 6150-6165' w/ 300 gals 15% HCL-LSTNE-FE acid, 1000 gals 10# CaCl wtr, 1000 gals LC, 2000 gals 60/40 15% HCL/Xylene, flushed w/18 BLC. Swbd 8 hrs rec 52 BO & 24 BW. POH w/tbg & pkr. RIH w/2-3/8" OD tbg OE set @ 6068'. Ran rods & pump. On 24 hr potential test 12/24/78 pmpd 51 BO, 36 BW, 59 MCF GOR 1157:1. Final Report.

SIGNED

TITLE Dist. Drlg. Supt.

DATE 01/18/79

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING DISTRICT ENGINEER

DATE JAN 22 1979

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side