

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse 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"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-067858	
2. NAME OF OPERATOR Atlantic Richfield Company ✓		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 625' FNL & 175' FWL (Unit letter D)		8. FARM OR LEASE NAME Empire Abo Unit "M"	
14. PERMIT NO.		9. WELL NO. 132	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3540.6' GR		10. FIELD AND POOL, OR WILDCAT Empire Abo	
		11. SEC., T., R., M., OR ELK. AND SURVEY OR AREA 11-18S-27	
		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

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) Spud, Run Surf Csg & Cmt

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.)*

Spudded 11" hole @ 6:00 PM 12/18/78. Lost 'circ @ 56'. Fin 11" hole @ 8:00 PM, 12/19/78. RIH w/8-5/8" OD 24# K-55 csg, set @ 1000', FC @ 927'. Cmdt csg w/200 sx Reg Fill cmt cont'g 2% CaCl, 7#/sk gilsonite, 1/4#/sk flocele followed by 200 sx RFC cont'g 3% CaCl, 7#/sk gilsonite, 1/4#/sk flocele, followed by 100 sx C1 C cont'g 6# salt/sk, 2% CaCl. No returns. PD @ 1:00 AM 12/20/78. Temp survey indicated TOC @ 150'. Cmdt 8-5/8" x 11" annulus thru 1" pipe w/125 sx Reg Fill cmt cont'g 2% CaCl to surf. Compl job @ 3 PM 12/20/78. WOC 19-3/4 hrs. Pressure tested csg to 1000# 30 mins OK. Commenced drlg new fm @ 8:45 PM 12/20/78.

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

SIGNED

TITLE Dist. Drlg. Supt.

DATE 12/29/78

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING DISTRICT ENGINEER

DATE

JAN 5 1979

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side