

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088  
RECEIVED

MAY 26 1992

<b>SUNDRY NOTICES AND REPORTS ON WELLS. C. D.</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-015-22750
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator ARCO OIL AND GAS COMPANY		6. State Oil & Gas Lease No.
3. Address of Operator BOX 1710, HOBBS, NEW MEXICO 88240		7. Lease Name or Unit Agreement Name EMPIRE ABO UNIT "I"
4. Well Location Unit Letter D : 660 Feet From The NORTH Line and 150 Feet From The WEST Line Section 5 Township 18S Range 28E NMPM EDDY County		8. Well No. 251
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3673.8' GR		9. Pool name or Wildcat EMPIRE ABO

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: TEMPORARILY ABANDON ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

HOLD WELL BORE TO MONITOR BHP ANNUALLY

TD 6240'; PBD 6185'; PERFS: 6012-6034'; PKR 5943'

05/12/92 LOAD CSG w/8.6# BRINE w/WT-675 CHEMICAL, PRESSURE UP TO 560 # AND HOLD FOR 20 MINS. CHART ATTACHED. WITNESSED BY DERROLL WOLFENBARGER-ARCO AND GARY WILLIAMS-NMOCD.

This Approval of Temporary  
Abandonment Expires

5/97

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE James D. Cogburn TITLE Operations Coordinator DATE 5/21/92  
TYPE OR PRINT NAME James D. Cogburn TELEPHONE NO. 391-1600

(This space for State Use)

APPROVED BY [Signature] TITLE Field Rep DATE 5/27/92

CONDITIONS OF APPROVAL, IF ANY:

