STATE OF NEW MEXICO				
ENERGY AND MINERALS DEPARTMENT	OIL CONSERV	TION DIVISION		
DISTRIBUTION	P. O. BO		:	Form C-103 Revised 10-1-78
SANTA FE I DE	CEIVED BYA FE NEW	/ MEXICO 87501	•	WE11264 10-1-10
PILE IN	,EIVED DI	•	5a. Indicate	Type of Lease
U.S.G.S.	1 1 1006		State	Fee
OPERATOR . AUL	G 1 1 1986			l & Gas Lease No.
	O. C. D.		E-5	5313
	CHA AND REPORTS ON	WELLS		
(DO NOT USE THIS FORM FOR TOTAL USE "APPLICATION FOR PE	ERMIT -" (FORM C-101) FOR SU	BACK TO A DIFFERENT RESERVOIS CH PROPOSALS.)		
1.			1	reement Name
OIL X GAB WELL OTHE	A+			re Abo Unit "L"
2. Name of Operator ARCO Oil and Gas Company	Division of Atla	ntia Piahfiald Co	10	
	- DIVISION OF ACTA	ntit kithileid to.	9, Well No.	
3. Address of Operator P.O. Box 1610, Midland, 7	Texas79702		13	33
4. Location of Well	.0.007 77 02		10. Field	and Pool, or Wildcat
	Ç0 <u>1</u>	050	Empire	e (Abo)
UNIT LETTER M 800	FEET FROM THE South	LINE AND	LILLI WOM WILLIAM	
THE West LINE, SECTION	2 19	S BANGE 27F	HMPM.	
	15. Elevation (Show whether		12. County	
	GR 3518'.	5	Eddy	
NOTICE OF INTENTI		SUBS	SEQUENT REPOR	
PERFORM REMEDIAL WORK	PLUS AND ABANDON	REMEDIAL WORK	H	PLUG AND ABANDONMENT
TEMPORARILY ABANDON		COMMENCE DRILLING OPHS. CASING TEST AND CEMENT JO	<u>.</u> H	PLUE AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	OTHER		
OTHER				
17. Describe Proposed or Completed Operations	(0)	anila and sine persisant datas	including estimated a	fore of starting any proposed
17. Describe Proposed or Completed Operations work) SEE RULE 1103.	(Clearly state all pertinent de	tatis, and give periment care	,,	
				•
*See attached procedure.				
* Propose to repair 5-1/2	2" production casir	ng and eliminate so	urce of pressu	re on the
8-5/8" x $5-1/2$ " annulus.				
		•		
	•			
		•		
	•			
16. I hereby certify that the information above is	true and complete to the best	of my knowledge and belief.		
, 1,1				
STENED Sent Way	TITLE	Drilling Engineer	DATE	8-8-86
	h f ==== 1		•	
· mb, Welling	(O)	IL AND GAS INSPECT	≪is as,	SEP 181986
APPROVED BY	TITLE TITLE	- MID GAS MOFECT	DATE	OFI TO 1906

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DATE	
AUTH NO.	

Well Name and No. Empire Abo Unit "L" #133 (OW) FWL, Sec. 2, T-18-S, R-27-E, Eddy Co., New Mexico State	Ocation800' FSL & 950'
Type of Job Repair Communication Fiel TD 6135 MD PBD 6107 DATUM 11' RKB Elevation KB	d Fmnire Aba
Wellhead Information $6"900$ Casing Information: Size Weight Grade Set @ Surface $8-5/8"$ 24 $K-55$ 1000	
Producing Liner 5-1/2" 15.5 K-55 6135 Present Perfs: From 6072 To 6092 Holes 40 Stimu	lation Acid
Present Open Hole: Size From To Stimu	
Tubing Data: Size2-3/8" Wt4.7	
Afscellaneous:DV tool @ 3999. TVD @ TD is 6100'. Bottom hole :and 311' west of surface location. Both production and surfacethem 10-31-85 Bled off. 3-86 SICP's 225#.	
them 10-31-63 bled 011. 3-86 SICF \$ 225#.	

PROCEDURE

- condition of the strength of the strength
- 4. W BOP. Sise per 5 POH.
- 3. RiH worldP & part on 2 1 8% and a the term below slips to $1000~\rm{psc}$. Set with a linear correct to $1900~\rm{psc}$.
- Test sears in thend by means of test port to 1000 est if possible. FOH wepar isig esg for leaks.
- 5. Repair comunication as necessary by squeeze comenting and/or replacing seals in toght. If necessary to squeeze cement, dump 2 sx sd on REF.
- 5. Rill wartryg hd on 2 3:8" prdn thg & wash sd off RBP. Rtrve RBP & POH. RIH w/redressed R-4 pkr on 2-3.8" pron thg & set * ±5998' Test ann to 500 psi. ND BOP NE wellhead.
- 7. Swab to kick off. TOPS.

AND DR Dees

m Brun-8-4-86