

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT 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"/>		7. UNIT AGREEMENT NAME Empire Abo Pressure Maintenance Project	
2. NAME OF OPERATOR ARCO Oil & Gas Company Division of 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. 153	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 200' FNL & 1925' 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.) 3593' 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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Spud, run surf csg & cmt. <input checked="" type="checkbox"/>	

(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 @ 7 AM 5-6-79, drld to 995'. RIH w/8-5/8" OD 24# K-55 csg set @ 995', FC @ 909'. Cmtd 8-5/8" OD csg w/400 sx Lite Wt. w/1/2# flocele/sk, 5# Gilsonite/sk w/2% CaCl₂ & 100 sx Cl "C" w/2% CaCl₂. PD @ 1 AM 5-7-79 w/800#. Circ 100 sx cmt to pit. Cmt circ to surface WOC 18 hrs. Pressure tested csg to 1000# for 30 mins, OK.

RECEIVED

MAY 10 1979

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED *[Signature]*

TITLE Dist. Drlg. Supt.

DATE 5-9-79

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) ALBERT K. STALL

TITLE DISTRICT ENGINEER

DATE MAY 22 1979

CONDITIONS OF APPROVAL, IF ANY: