

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

Form C-103
Revised 10-1-78

MAR 24 1980

O. C. D.

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
B-11594-3

SUNDRY NOTICES AND REPORTS ON WELLS, ARTESIA, OFFICE
(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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	5a. Indicate Type of Lease
2. Name of Operator	8. Farm or Lease Name
ARCO Oil & Gas Company	Empire Abo Pressure Maintenance Project
Division of Atlantic Richfield Company	Empire Abo Unit "J"
3. Address of Operator	9. Well No.
P. O. Box 1710, Hobbs, New Mexico 88240	213
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER E, 2050 FEET FROM THE North LINE AND 100 FEET FROM THE West LINE, SECTION 6 TOWNSHIP 18S RANGE 28E N.M.P.M.	Empire Abo
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3649.2' GR	Eddy

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☒
CASING TEST AND CEMENT JOB ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

17. 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.

Drilled 23" hole to 30'. Set 16" OD Conductor pipe @ 30' and cmtd. w/Redi-Mix to surface. Spudded 12-1/4" hole on 3-10-80. Drld. to 1000'. RIH w/9-5/8" OD 36# K-55 csg. set @ 1000'. FC set @ 926.67', Cmtd. 9-5/8" csg. w/400 sx. Cl C cmt. w/12# Gilsonite, 1/4# celloflake/sk., 2% Ca Cl followed by 100 sx. Cl C cmt. w/2% Ca Cl, cmt. not circ. WOC 18 hrs. Ran Temp. survey. Temperature survey indicated TOC @ 50' FS. Cmtd 50' to surf w/2 yds Redi-mix. Press tested csg to 1200# for 30 mins OK.

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

SIGNED [Signature] TITLE Dist. Drlg. Supt. DATE 3-17-80

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE APR 1 1980

CONDITIONS OF APPROVAL, IF ANY: