Form Approved.

UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Dec. 1973	Apr. 112, MI 8233	Budget Bureau No. 42-R1424
UNITED DEPARTMENT OF	STATES	5. LEASE NM-7713
GEOLOGICA	L SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND		7. UNIT AGREEMENT NAME
reservoir. Use Form 9–331–C for such propo	osals.)	8. FARM OR LEASE NAME West Red Lake Unit
1. oil gas other		9. WELL NO.
2. NAME OF OPERATOR ARCO	Oil and Gas Company	32
Division of Atlantic	Richfield Company	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR		Red Lake Queen Grbg SA
P. O. Box 1710, Hobbs	New Mexico 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT I		AREA 8-18S-27E
AT SURFACE: 1980' FNL &	660' FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: as		Eddy New Mexico
AT TOTAL DEPTH: as ab	oove	14. API NO.
16. CHECK APPROPRIATE BOX TO	INDICATE NATURE OF NOTICE,	30-015-24638
REPORT, OR OTHER DATA		15. ELEVATIONS (SHOW DF, KDB, AND WD) 3493.3' GR
	AUDOCOUCHT DEDOCT OF	

P. O. Box 1710, Hobbs, New Mexico 88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 1 AT SURFACE: 1980' FNL & 660' FEL AT TOP PROD. INTERVAL: as above AT TOTAL DEPTH: as above 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTIC REPORT, OR OTHER DATA SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF RECEIVED BY X FRACTURE TREAT SHOOT OR ACIDIZE \mathbf{x} JUN (Cate: Gert results of multiple completion or zone REPAIR WELL change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE O. C. D. **CHANGE ZONES** ARTESIA, OFFICE ABANDON* (other)

- 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.)*
 - 1. RU, install BOP & POH w/compl assy.
 - 2. Set RBP @ 1350'.
 - 3. Perf Premier Sd 1236-43' w/2 JSPF.
 - 4. Set pkr @ 1150' & acidize w/1000 gals 15% NEFE. Swab back & test.
 - 5. Frac perfs 1236-43' w/14,500 gals cross linked gel & 27,000# sd. Run temp survey.
 - 6. POH w/RBP & pkr. RIH w/compl assy, return to production.

Subsurface Safety Valve: Manu. and Type	Set @	Ft.
18. I hereby certify that the foregoing in true and correct SIGNED MAT E. Dalding TITLE Drlg Engr.	DATE5/23/84	
APPROVED BY TILE PLEY CONDITIONS OF APPROVAL, IF ANY:	DATE 6/1/84	