

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN ☒ PLICATE*
(Other instr. is on re-
verse 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.)

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injection Well</p> <p>2. NAME OF OPERATOR Atlantic Richfield Company ✓</p> <p>3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface</p> <p>1980' FSL & 1980' FEL (Unit letter J)</p> <p>14. PERMIT NO.</p> <p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3712' DF</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. LC047633 (a)</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Swearingen "A"</p> <p>9. WELL NO. 6</p> <p>10. FIELD AND POOL, OR WILDCAT Shugart</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 14-18S-31E</p> <p>12. COUNTY OR PARISH Eddy</p> <p>13. STATE N.M.</p>
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O. C. C.
ARTESIA, OFFICE

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) <input type="checkbox"/>	
(Other) Plug & Abandon <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.)*

Waterflood has progressed beyond this WIW and is no longer needed. Propose to plug & abandon in the following manner:

1. POH w/completion assembly.
2. Run 7" cmt retr on tbg. Set @ 3400'.
3. Squeeze below retr w/35 sx Cl C cmt cont'g 4% gel & 8#/sk salt.
4. Cut off & recover 7" csg from free point.
5. Spot 35 sx Cl C cmt cont'g 4% gel & 8#/sk salt half in & half out of 7" csg stub.
6. Spot 50 sx Class C cmt cont'g 4% gel & 8#/sk salt across top of salt & 8-5/8" csg shoe.
7. Spot 10 sx cmt @ surface. Erect dry hole marker.
8. Clean & level location.

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U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED <i>H. J. [Signature]</i>	TITLE Dist. Drlg. Supv.	DATE 3/10/75
(This space for Federal or State office use)		

APPROVED BY <i>[Signature]</i>	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side