N. M. O. C. C. COPY Form 9-331 (May 1963) ICATE* Budget Bureau No. 42-R1424. DEPARTMENT OF THE INTERIOR (Other in verse side) 5. LEASE DESIGNATION AND SERIAL NO. **GEOLOGICAL SURVEY** NM 0400877 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 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.) 7. UNIT AGREEMENT NAME WELL GAS WELL X OTHER NAME OF OPERATOR 8. FARM OR LEASE NAME Atlantic Richfield Company BO-2 Federal Com 3. ADDRESS OF OPERATOR 9. WELL NO. P. O. Box 1710, Hobbs, New Mexico 88240 LOCATION OF WELL (Report location clearly and in accordance with any Staté requirements.* See also space 17 below.)
At surface 10. FIELD AND POOL, OR WILDCAT Avalon Morrow Gas 11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA 660' FSL & 1980' FEL (Unit letter O) Sec-9, T21S, R26E 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH | 13. STATE 3280.6' GR Eddy: N.M. 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL FRACTURE TREAT MULTIPLE COMPLETE PRACTURE TREATMENT ALTERING CASING SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING ABANDONMENT* REPAIR WELL (Other) Spud, run surf csg & cmt CHANGE PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (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.)* On 11/7/74 drilled 24" hole to 30'. Set 30' of 20" conductor pipe and cmtd $w/2\frac{1}{2}$ yds Redi-mix to surface. Spudded $17\frac{1}{2}$ hole @ 9:00 PM 11/15/74 and drilled to 541'. Ran 13 jts 13-3/8" OD 48# H-40 csg set @ 536'. Cmtd w/560 sx Cl C w/2% CaCl. to circ. Cmtd behind 13-3/8" OD csg w/15 yds Redi-mix to surface. WOC 24 hrs. tested csg & BOP to 600# for 30 mins OK. Drlg. ahead. RECEIVED

NOV 2 2 1974

ARTESIA NEW MEXICO 18. I hereby certify that the foregoing is true and correct Dist. Drlg. Supv. 11/21/74 SIGNED TITLE DATE (This space for Federal ₽h. A DATE 2 2 1074

TITLE

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: