

RECEIVED
NM OIL CONS. COMMISSION

c/27

UNITED STATES
DEPARTMENT OF THE GEOLOGICAL SURVEY

Drawer DD
MAY 10 5 1983

5. LEASE
LC-029435-(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
J. L. Keel "A"

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
Grayburg Jackson QGSA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
7-17S-31E

12. COUNTY OR PARISH | 13. STATE
Eddy | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3745' GR

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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR ARCO Oil and Gas Company
Division of Atlantic Richfield Company

3. ADDRESS OF OPERATOR
P. O. Box 1710, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 440' FSL & 440' FWL
AT TOP PROD. INTERVAL: as above
AT TOTAL DEPTH: as above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>

(other) Plugback, perf & test same zone

DEPT OF THE GEOLOGICAL SURVEY

NOTE: Report results of multiple completion or zone change on Form 9-330.

ROSWELL, NEW MEXICO

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.)*

RU, POH w/rods & pump. Install BOP & POH w/tbg. CO to 3140'. Spot cmt plugs in open hole 3529-3154'. WOC. RIH w/bit. Drill cmt to btm of 6-5/8" csg @ 3154'. Press test csg to 500#. Run GR-N log. Select perms from log & perf. Set pkr above top perf & acidize w/2500 gals 15% HCL. Swab test. POH w/pkr. RIH w/compl assy & return to production.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Peter E. Sallinger TITLE Drlg. Engr. DATE 4/25/83

APPROVED (This space for Federal or State office use)

(Sig. 831) PETER W. CHESTER TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
MAY 4 1983