-		Form approved. Copy locari
Form 9-331 UI ED STATI	ES SUBMIT IN TRIF	Rudget Rureau No. 49-R1424
DEPARTMENT OF THE INTERIOR (Other Instruction 1 re-		5. LEASE DESIGNATION AND SERIAL NO.
GEOLOGICAL SURVEY		LC 029395 b
SUNDRY NOTICES AND REP	ODTS ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(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.)		
1.		7. UNIT AGREEMENT NAME
WELL GAS OTHER Water Injection Well		
2. NAME OF OPERATOR		8. FARM OR LEASE NAME
ATLANTIC RICHFIELD COMFANY		Turner "B" (A)
3. ADDRESS OF OPERATOR		9. WELL NO.
P. O. Box 1920, Hobbs, New Mexico 8-240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*		10. FIELD AND POOL, OR WILDCAT
See also space 17 below.)		
At surface		Grayburg Jackson 11. sec., t., E., M., or BLK. AND
660' fr South line and 660' fr East line		SURVEY OR AREA
		29-T17S-R31E
1 15 Province (Charles	w whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
14. PERMIT NO. 15. ELEVATIONS (Show	3747' GR	Eddy New Mexico
	7/47 010	The French
16. Check Appropriate Box To I	Indicate Nature of Notice, Report	t, or Other Data
NOTICE OF INTENTION TO:	1	SUBSEQUENT REPORT OF:
[]		DEPLINING WELL
TEST WATER SHUT-OFF PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL ALTERING CASING
FRACTURE TREAT MULTIPLE COMPLETE	FRACTURE TREATMENT SHOOTING OR ACIDIZE	
SHOOT OR ACIDIZE ABANDON*	I	verted to WIW
REPAIR WELL CHANGE PLANS	(Note: Report	results of multiple completion on Well
(Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state	all pertinent details and give pertinent	Recompletion Report and Log form.)
proposed work. If well is directionally drilled, give sub nent to this work.) *	surface locations and measured and true	vertical depths for all markers and zones perti-
nent to this worth,		
3-11-69 Set C.I. bridge plug @ 3600		
Premier thru 4-1/2"OD casing	g @ 3454-3512'. Acidize	ed Fremier perfs. 3454-3512'
w/1000 gals. M.A. Max. Fres	s. 3500#, Min. Press. 18	350#. Avg treating Fress.
2000#. ISIP 1400#, 5 mins.	SIP 1250# @ 2.5 BPM. H	reparing to inject water
into Premier perfs. 3454-35	12' Russell-Turner Water	rflood Area.
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MAR 1 8	1969 D. TESTE	
	1969 MAR 17 1969 MAR 17	
O. C.	C.	
ARTESIA, D	FFICE	H
\wedge		
18. I hereby certify that the foregoing is true and correct		84,848, ME 1285
SIGNED A CLASSIC TO THE STATE OF THE STATE O	Surerintendent	name March 13. 1969.

*See Instructions on Reverse Side