

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TWO COPIES
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
LC 029395 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Turner "B"

9. WELL NO.
4

10. FIELD AND POOL, OR WILDCAT
Grayburg-Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 17, T17S, R31E

12. COUNTY OR PARISH
Eddy

13. STATE
N.M.

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.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER **WIW**

2. NAME OF OPERATOR
Atlantic Richfield Company

3. ADDRESS OF OPERATOR
P. O. Box 1978, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FSL & 1980' FWL (Unit letter N)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3672' Grd.

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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input checked="" type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		
CHANGE PLANS	<input 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.)*

In an attempt to increase water injectivity, we propose to treat existing perforations 3320-3422 with 15,000 gallons of slick fresh water containing 15,000# of 20/40 sand.

RECEIVED

DEC 10 1970

O. G. O.
ARTESIA, OFFICE

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

SIGNED *D. D. Hutchins*

TITLE District Dirg. Supervisor

DATE 12-4-70

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

APPROVED

R. L. BEEKMA