

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN  
(Other Inst. on re-  
verse side)PLICATES  
ons on re-Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 029395 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Turner "A"

9. WELL NO.

15

10. FIELD AND POOL, OR WILDCAT

Grayburg-Jackson

11. SEC., T., R., M., OR BLE. AND  
SURVEY OR AREA

Sec. 19, T17S, R-31E

1.

OIL ☐ GAS ☐  
WELL ☐ 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

1650' FNL &amp; 1980' FWL (Unit letter F)

14. PERMIT NO.

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

3658' Grd

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

16.

## Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☒

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

☐  
☐  
☐  
☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

☐  
☐  
☐

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

☐  
☐  
☐(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 injection rates, we propose to treat existing perforations 3321-3432' w/15,000 gallons slick fresh water containing 15,000# of 20/40 sand.

RECEIVED

DEC 7 1970

B. B. C.  
ARTESIA, OFFICERECEIVED  
DEC-4 1970  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

*O. D. Ditcher*

TITLE

Dist. Drlg. Supervisor

DATE

12-3-70

(This space for Federal or State office use)

APPROVED BY  
COMMISSIONER OF GEOLOGY, IF ANY:

TITLE

DATE

APPROVED  
*H. L. BEEKMA*

\*See Instructions on Reverse Side