

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-028805(b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(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 ☐ NOV 18 '87

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

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

2310' FNL & 990' FWL (Unit letter E)

14. PERMIT NO.  
30-015-00750

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3557' GR

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Empire Abo Unit "J"

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

Empire Abo

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

3-18S-27E

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\*

Returned well to production

(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.)

Well returned to production 8/29/87. On test produced 63 BO, 3 BW & 410 MCFD on 32/64" ck, GOR 6508. Final Report.

ACCEPTED FOR RECORD

NOV 17 1987

SJS

CARLSBAD, NEW MEXICO

RECEIVED  
NOV 18 8 30 AM '87  
CARLSBAD OFFICE  
AREA RECORDERS

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

SIGNED Steve D. Smith

TITLE Area Prod Supt.

DATE 11/9/87

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side