	tertal ID x
Form 9-331 - N.M.O.C.D. COPY	Form Approved.
Dec. 1973 UNITED STATES	Budget Bureau No. 42-R1424
DEPARTMENT OF THE INTERIOR	5. LEASE
GEOLOGICAL SURVEY	
GEOLOGICAL SORVET	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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.)	7. UNIT AGREEMENT NAME
<u></u>	8. FARM OR LEASE NAME
1. oil gas well well other	Empire Abo Unit "M"
2. NAME OF OPERATOR ARCO Oil & Gas Company	9. WELL NO. 14
Division of Atlantic Richfield Company	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Empire Abo
P. O. Box 1710, Hobbs, New Mexico 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
<ol> <li>LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)</li> </ol>	AREA 11–18S–27E
AT SURFACE: 660' FNL & 1980' FWL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH: As above	EddyNew Mexico
	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3573'
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
SHOOT OR ACIDIZE	
	NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING AUG 28 19	BU change on Form 9-330.)
CHANGE ZONES O. C. D.	
ABANDON*	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dir	all pertinent details, and give pertinent dates,
measured and true vertical depths for all markers and zones pertinent	to this work.)*
1. Rigged up on 7/28/80.	
2. RIH w/ RBP, set BP @ 3851'.	
3. Spot 100' C1 "C" cmt w/ 2% CaC1 on top of BF 4. Spot 100' C1 "C" cmt w/ 2% CaC1 <sup>2</sup> 950-850'	•
clean & level location per BLM stipulations.	BEALT regulation dry hole marker,
FINAL REPORT.	RECEIVED <sup>180.</sup>
	· · · · · · · · · · · · · · · · · · ·
	AUG 1 4 1980
· · · ·	U.S. GEULUGIUAL SURVEY Posted ID-2
	ARTESIA, NEW MEXICO 9-3-80
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNED 10, W to ane TITLE Dist. Drlg. Su	<u>PC - DATE 8/12/80</u>
(This space for Federal or State office	e use)
APPROVED BY TITLE TITLE	DATE
Solutions of Althorae, IF ANT:	

I

. نىن

\*See Instructions on Reverse Side