

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-0292679

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal 22 ARC

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Caprock-Queen

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

SURVEY OR AREA

Sec. 22, T12S, R32E

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

1. OIL ☐ GAS ☐ OTHER ☐ P & A

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

1980' FNL & 660' FWL (Unit letter E)

14. PERMIT NO.

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

4358' GR

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.)*

This well has been plugged & abandoned in the following manner:

Spotted 20 sack cement plug 2900-3050'. Shot off 5½" casing @ 702' WLM. Recovered 23 jts (694.76') 5½" OD 8R J-55 15.5# casing. Spotted 45 sk cement plug 644-772'; 45 sack cement plug 159-241'; 25 sack cement plug in top of well. Erected dry hole marker. 9#/gal gel mud was left between all cement plugs. 9-5/8" casing remains intact. Well P & A 9/10/71.

Your office will be notified when location is ready for inspection.

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

SIGNED

R.D. Litcher

TITLE

Dist. Drlg. Supervisor

DATE

9/15/71

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side