Form 9-331 "May 1963)	UNITED STATES	SUBMIT IN TRIPLICATE	Budget Bureau No. 42-R1424.
•	MEN)F THE INTER	IOR verse side)	5. LEASE DESIGNATION AND SERIAL NO.
			6. IF INDIAN, ALLOTTEE OR TEIBE NAME
SUNDRY NO (Do not use this form for propulse "APPLIC	VICES AND REPORTS (osals to drill or to deepen or plug l CATION FOR PERMIT—" for such p	ON WELLS back to a different reservoir. proposals.)	
			7. UNIT AGREEMENT NAME
WELL X WELL OTHER			
2. NAME OF OPERATOR			S. FARM OR LEASE NAME
Atlantic Richfield Company 3. ADDRESS OF OPERATOR			Mescalero Ridge Unit 35
Box 1710, Hobbs, New M	Merico 88240		9, WELL NO.
 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 1980' FEL (Unit letter J) 			2 10. FIELD AND POOL, OR WILDCAT
			Pearl Queen 11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA
			35-19S-34E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF	, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	3705' GR		Lea N.M.
16. Check A NOTICE OF INTE	ppropriate Box To Indicate N		
		SUBSEQ	UENT REPORT OF :
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT SHOOT OR ACIDIZE X	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
	ABANDON* CHANGE PLANS	SHOOTING OR ACIDIZING	ABANDONMENT*
(Other)		(Other)(NOTE: Report_results	s of multiple completion on Well
7. DESCRIBE PROPOSED OR COMPLETED OPI	ERATIONS (Clearly state all pertinent		letion Report and Log form.) , including estimated date of starting any cal depths for all markers and zones perti-
 4. Pump well approx 5 5. Perforate w/l JSPF 6. RIH w/tbg. Pump sc 400# Benzoic acid f 	ods w/pump unseated. pump, shut in 24 hrs days, POH w/compl ass @ 4559, 4571, 4595, 4 ale treatment. Acidi lakes & 50#/1000 gal by 2500 gals 15% DI M	s. sy. 4605, 4616, 4915, 492 ize w/2500 gals 15% D refined guar-gelled NEA acid. Swab back	24, 4934, 5035'. DI NEA followed by 200- 10# brine. Pump scale
		Г	L'WEIMED
		<u>ک</u> تا	
			JAN 24 1979
			GEOLOGICAL SURVEY OBBS, NEW MEXICO
8. I hereby certify that the foregoing is	s true and correct		
SIGNED	TITLE D	ist. Drlg. Supt.	<u>DATH</u> 1/23/79
(This snace for Endowl and The T		-01 -04PC1	
(This space for Federal or State offic	TITLE	APPRO	VED
CONDITIONS OF APPROVAL, IF A		JAN 2 4	
	*See Instructions	on Reverse Side ACTING DISTRIC	TENGINEER

• • • • s e de la composition Esta composition de la 4. ja 19. ja 19.

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TO SERVICES AL SHRVES BUBBS, HEEK MEXICO



ATLANTIC RICHFIELD COMPANY Blow Out Preventer Program

Lease Name Mescalero Ridge Unit 35

Well No. 2

Location	1980' FSL & 1980' FEL	
	Sec 35-19S-34E. Lea County	

BOP to be tested before installed on well and will be maintained in good working condition during drilling. Al wellhead fittings to be of sufficient pressure to operate in a safe manner.