Form 9-331 (May 1963)

UN! D STATES SUBMIT IN (Other inst.) DEPARTMEN. OF THE INTERIOR verse side)

SUBMIT IN TRIPLICATE*
(Other instructions reverse side)

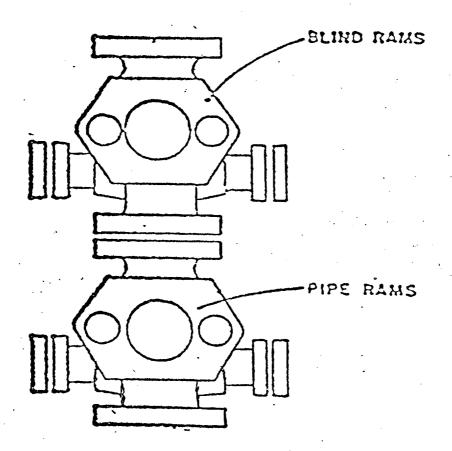
Form approved.
Budget Bureau No. 42-R1424.
EASE DESIGNATION AND SERIAL NO.

DEPARTMENT OF THE INTERIOR verse side)			NM-052
	GEOLOGICAL SURVEY		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 "APPLICATION FOR PERMIT—" for such proposals.)			
		,	7. UNIT AGREEMENT NAME
OIL GAS OTHER Water Injection Well			NAME
2. NAME OF OPERATOR ARCO Oil and Gas Company			8. FARM OR LEASE NAME
	of Atlantic Richfield Company	- o 57 (E)	Mescalero Ridge Unit 35
3. ADDRESS OF OPERATOR	គ្រា	COFINEIII	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Box 1710, Hobbs, New	Mexico 88240	y State requirements.	10. FIELD AND POOL, OR WILDCAT
BOX 1/10, HODDS, New MEXICO GOZOTORICE will any State requirements. LOCATION OF WELL (Report location clearly and in accordance will any State requirements. See also space 17 below.) At surface			Pearl Queen
1980' FSL & 1980' FV	л (Unit letter K)	(IIII)	11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA
1980 FSL & 1900 F		GEOLOGICAL SURVEY	35-19S-34E
	H	OBBS, MEN INTER	12. COUNTY OR PARISH 13. STATE
14. PERMIT NO.	15. ELEVATIONS (Show whether	DF, RT, GR, etc.)	Lea N.M.
	3705' GR		The state of the s
16. Check	Appropriate Box To Indicate	Nature of Notice, Report, o	or Other Data
	TENTION TO:	SUBS	SEQUENT REPORT OF:
[]	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
TEST WATER SHUT-OFF	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
FRACTURE TREAT SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other)	sults of multiple completion on Well
(Other) Repair Waterf	low behind 5½"Csg X	Completion of Refe	ambielion Report and Log terms
17. DESCRIBE PROPOSED OR COMPLETED proposed work. If well is dinent to this work.) *	o OPERATIONS (Clearly state all pertitions of the pertition of the pertiti	ocations and measured and true ve	ates, including estimated date of starting any ortical depths for all markers and zones perti-
4957, 4978, 5030, 5 8-5/8" OD 23# csg s	072, 5102'. et @ 202' & cmtd w/12	5 sx. Cmt circ to s	, 4927-5019', 4580, 4944, surf. survey @ 3250'. surface in the following
manner: 1. Rig up, kill wel 2. Run CBL.	.1, install BOP, POH w	7/2-3/8" OD tbg & pkr	rs. (1986) - 1986 - 1986 - 1986
4. Perforate w/4 JS 5. Spot 2 sx sd on	5 @ approx 1700'. Est	ablish circ behind 5	5½" csg to surf.
/ 1	. 0 1650'		of a class broden
7. Squeeze cmt thru	ı perfs @ 1700' w/2/5	sx C1 C cmt w/6# sa.	lt/sk, 2% CaCl. Close braden
hand & bradenhas	ad squeeze. WOC.		그는 사람들은 이 사람들이 되었다.
8. Drill out cmt, (CO sd, retrieve BP.	eriessure lest squeez	
9. RIH w/injection	assy & return to inj	ection.	
			그는 이외 [2] 이 왕회 - 회사회전
18. I hereby certify that the foreg	olng is true and correct		
CPV /	D. CANE MINITE	Dist. Drlg. Supt.	DATE 6/13/79
SIGNED -		Anno A	VED
(This space for Federal or Sta	te office use)	APPRO	了「我们就会的一个,
APPROVED BY	TITLE .	- I III 1 A	1979
CONDITIONS OF APPROVAL	, IF ANY:	JUN 1 T	HAR
			FENGINEER
	*Saa Inchus	tions on REACTE NG DISTRIC	The same
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ATIANTIC RICHFIELD COMPANY Blow Out Preventer Program

Lease Name	Mescalero Ridge Unit 35 #8
Well No	8.
Location	1980' FSL & 1980' FWL
	Sec 35-19S-34E, Lea County

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