

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

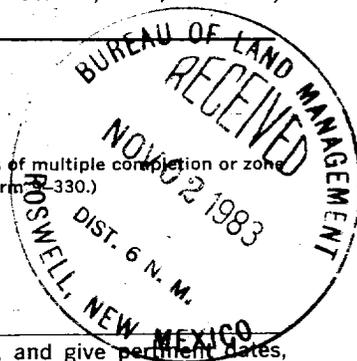
1. oil well gas well other
2. NAME OF OPERATOR ARCO Oil and Gas Company
Division of Atlantic Richfield Company
3. ADDRESS OF OPERATOR
P. O. Box 1710, Hobbs, New Mexico 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990' FSL & 660' FEL
AT TOP PROD. INTERVAL: as above
AT TOTAL DEPTH: as above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- | | | | |
|--------------------------|-------------------------------------|-----------------------|--------------------------|
| REQUEST FOR APPROVAL TO: | | SUBSEQUENT REPORT OF: | |
| TEST WATER SHUT-OFF | <input type="checkbox"/> | | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input checked="" type="checkbox"/> | | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | | <input type="checkbox"/> |
| CHANGE ZONES | <input checked="" type="checkbox"/> | | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | | <input type="checkbox"/> |
| (other) | <input type="checkbox"/> | | <input type="checkbox"/> |

5. LEASE
NM-052
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Mescalero Ridge Unit 35
9. WELL NO.
10
10. FIELD OR WILDCAT NAME
Pearl Queen
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
35-19S-34E
12. COUNTY OR PARISH
Lea
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3704' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)



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.)*

- Rig up, POH w/rods & pump. Install BOP. POH w/compl assy.
- RIH w/tbg OE & spot sd 5175' to 5100'. POH w/tbg.
- Set cmt retr @ 4550' & cmt squeeze perfs 4595-4976'. Dump 10 sx cmt on top of retr.
- Run CET and PAL logs 4500-0'. Run CNL-GR & Carbon-oxygen log 4500' to TOC.
- Perforate Pearl Seven Rivers interval w/1 JSPF @ approx. 3982, 85, 88, 91, 94, 97'.
- Set pkr @ 3930' & acidize perfs 3982-97' w/1500 gals 15% NEFE acid. Swab back & test.
- POH w/pkr. RIH w/compl assy. Remove BOP. RIH w/rods & pump & return to production.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Poland P. Lawrence Drlg. Engr. DATE 10/31/83

APPROVED (This space for Federal or State office use)

(Orig. Sgd.) PETER W. CHESTER TITLE _____ DATE _____
APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

NOV 17 1983



RECEIVED
NOV 18 1983
C.C.D.
HOBBS OFFICE