	INTER	STATES	N.M Cons. P.O. Box 1980	Division form approved
Form 3160-5 (June 1990)		F THE INTERIOR	Hobbs, NM 88241	Budget Bureau No. 1004-0135 Expires: March \$1, 1995
(June 1996)	BUREAU OF LAN	D MANAGEMENT	10003, 14141 0024	5. Leave Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS				6. If Indian, Allottee or Tribe Name
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.				
U	se "APPLICATION FOR PE	MIT - " for such proposal	8	14080013527
SUBMIT IN TRIPLICATE				7. If Unit or CA, Agreement Designation
1. Type of Well		<u> </u>		Fee
Oil X Gas Well Other				8. Well Name and No. Barber Gas Com 1
2. Name of Operator ARCO Permian				
3. Address and Telephone No.				9. API Well No. 30-025-06022
P.O. Box 1089, Eunice, NM 88231 505-394-1649				10. Field and Pool, or exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				Eumont Yates SRQ Gas
Unit Letter E, 1650' FNL & 990' FWL Sec. 8, T20S, R37E				11. County or Parish, State
				Lea NM
12. CHECK A	APPROPRIATE BOX(s) 1	OF NOTICE, REPORT,	OR OTHER DATA	
TYPE OF SUBMISSION TYPE OF ACTION				
Notice	of intent	Abandonment		Change of Plans
-		Recompletion		New Construction
X Subseq	uent Report	Plugging Back	۲	Non-Routine Practuring
Final A	bandonment Notice	Casing Repair		Water Shut-Off
		Altering Casis	w Vdd Perfs & Acidize	Conversion to Injection Dispose Water
				(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
TD: 3875° PBC 06/04/97: SET RAN 2-3/8° TBG	CIBP @ 2903' TO ISOLAT	E LOWER EUMONT PERFS.	ADD EUMONT PERFS 24 UCED 0 BO, 0 BW, 123	458-2612°, ACIDIZE W/3800 GALS 36 MCF, ON 48/64° CHOKE, 75∯ TE
		or a sep b Pr to	CORU	RECEIVED 1997 JUL -8 A 9 BUREAU OF LAND M ROSWELL OFFICE
14. I hereby certify that the Signed	e foregoing is true and correct	Title Administrati	ve Assistant	
(This space for Federal	or State office use)	1754L-		<b>D</b>
Approved by Conditions of approval	I, if any:	Title	<u> </u>	Date
Title 18 U.S.C. Section 10 or representations as to any	001, makes it a crime for any person ka y matter within its jurisdiction.			od States any false, fictitious or fraudulent statements
		* See Instruction on Rev	rerse Side	$\mathbf{F}$
				$\sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{i$