COPIES RECEIVED		Form C-103 Supersedes Old C-102 and C-103			
FE	NEW MEXICO OIL CONSERVATION COMMISSION				
U.S.G.S.			5a. Indicate Type of Leas		
LAND OFFICE			State	Fee X	
OPERATOR			5. State On a Gas Lease	, 140.	
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 —" (FORM C-101) FOR SUCH PROPOSALS.)					
OIL GAS OTHER. Water Injection Well			7. Unit Agreement Name Seven Rivers Qu	7. Unit Agreement Name Seven Rivers Queen Unit	
2. Name of Operator			8. Farm or Lease Name	8. Farm or Lease Name	
Atlantic Richfield Com	pany				
3. Address of Operator			9. Well No.		
P. O. Box 1710, Hobbs, New Mexico 88240				31 10. Field and Pool, or Wildcat	
4. Location of Well		1			
UNIT LETTER I 23	ET FROM	mma			
East	34 TOWNSHIP	S 36E	_ NMPM. (())		
THELINE, SECTION					
	15. Elevation (Show whether		12. County		
3518' RKB			Lea		
	Appropriate Box To Indicate N	-	or Other Data QUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	X ALTERING CAS	=	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JQB	PEUG AND ABAT	TOUMENT	
PULL OR ALTER CASING		OTHER	Convert to WIW	X	
OTHER					
17. Describe Proposed or Completed Opwork) SEE RULE 1103.	perations (Clearly state all pertinent det	ails, and give pertinent dates, in	ncluding estimated date of starting	any proposed	
to 3610'. POH w/bit,	ing & pkr & LD. Made tr	d pump & CO sd from	3610-3700'. Ran RBI	P &	
RTTS on 2-7/8 tbg. S	Set RBP @ 3652' & RTTS @	3648'. Tstd tbg &	omented parts 3515-36	orrea S38!	
4 sx 10/20 sq in top o	of plug. PU & set RTTS @ Tagged TOC @ 3419'. D	y 3416 . Squeeze co	641 Press squeeze	ioh	
to 1000# for 30 mins (OK. Recovered RBP. Drle	d = 4-3/4 hole from	3736-3780'. New TD 3	3780'.	
Trtd OH 3736-3780' w/2	2000 gals 15% HC1-LSTNE	acid in 2 stages.	Ran 2-3/8" cmt lined	tbg	
& Baker Model AD-1 ter	nsion pkr set @ 3637'.	Installed injection	wellhead. Annulus	loaded	
w/treated fresh water	. Converted from oilwell	l to injection well	2/12/74.		
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18. I hereby certify that the information	n above is true and complete to the best	of my knowledge and belief.			
SIGNED HATTE	inrand TITLE_	Dist. Drlg. Supv.	DATE 4/3/74		
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