COPIES RECEIVED			-	Forth C-103		
TRIBUTION			Supersedes Old			
T FE			C-102 and C-103 Effective 1-1-65			
FILE				Enective 14	-00	
U.S.G.S.				5a. Indicate Typ	e of Lease	
LAND OFFICE				State X	Fee	
OPERATOR				5, State Oil & G		
	I	ł		B-22		
		Y NOTICES AND DEPORTS O				
DO NOT USE THIS FOR	M FOR PRO	Y NOTICES AND REPORTS O	N WELLS BACK TO A DIFFERENT RESERVOIR.			
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)					ent Name	
OIL GAS WELL WELL		Seven Rivers Queen Unit				
2. Name of Operator	8. Form or Lease Name					
Atlantic Richfie	ld Com	nany				
3. Address of Operator				9. Well No.		
P. O. Box 1710, Hobbs, New Mexico 88240						
4. Location of Well					53	
UNIT LETTER E 1980 FEET FROM THE NORTH LINE AND 660 FEET FRO					10. Field and Pool, or Wildcat	
UNIT LETTER		80 FEET FROM THE NOTTH	LINE AND 660 FEET	FROM Langlie N	lattix	
THE West	NE, SECTI	DN 2 TOWNSHIP 23S	RANGE 36E N	мрм. [[]]]]	///////////////////////////////////////	
	/////	15. Elevation (Show wheth		12. County		
ÖMMANNINNIN	71117	3470	' GR	Lea		
10.	Check .	Appropriate Box To Indicate	Nature of Notice, Report of	Other Data		
		TENTION TO:		IENT REPORT OF	:	
PERFORM REMEDIAL WORK		PLUG AND ABANDON	REMEDIAL WORK	ALTE		
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.		AND ABANDONMENT	
PULL OR ALTER CASING		CHANGE PLANS	CASING TEST AND CEMENT JOB			
			OTHER	Convert to WI	w x	
OTHER		Г	ר <u></u>		<u> </u>	
17. Describe Proposed or Con	npleted Op	perations (Clearly state all pertinent d	etails, and give pertinent dates, incl	uding estimated date of	starting any proposed	
work) SEE RULE 1103.						
Added parts $w/1$	15 00	@ 3697 3630 3635 364				
Found look in 41	us eau	@ 3627, 3630, 3635, 364	12, 3653 & 3657'. Tre	ated w/1000 ga	1 15% HCl acid	
		ng between 561' & 625'.				
cemented casing	leak w	/250 sx Class H + 3% Ca	aCl ₂ & circulated ceme	nt to surface	in 4 ¹ / ₂ " X	
9-5/8" annulus						
DO cement & PIF (
	175 sx	cement in 2 stages to	2400#.			
WOC 24 hours.						
		800# for 30 mins OK.				
Treated perfs 362	27-365	7' w/15,000# 20/40 sd i	in 15,000 gal 9# brine	•		
Ran Baker AD-1 to	ension	packer on 2-3/8" cemer	it lined tubing.			
Loaded annulus w	/treat	ed fresh water.				
Set packer @ 357)' for	water injection in per	f'd interval 3627-372	7'.		
Work complete 12,	/13/73	•		•		
18. I hereby certify that the in	formation	above is true and complete to the bes	t of my knowledge and belief.			
	+1					
SIGNED U.D. ANIL	cher		Dist. Drlg. Supv.	PATE 1/	3/74	
	•	2				
		\sim /			1074	
APPROVED BY				DATE		
CONDITIONS OF APPROVAL	., IF ANY	:				