Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

N.M. OIL CC __. COMMISSION
P.O. BOX 19ᴏ0
HOBBS, NEW MEXICO 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
LC060825-A

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE

7. If Unit or CA, Agreement Designation

1. Type of Well
   ☐ Oil Well   ☒ Gas Well   ☐ Other

8. Well Name and No.
EVA BLINEBRY   7

2. Name of Operator
ARCO Oil and Gas Company

9. API Well No.
30-015-10898

3. Address and Telephone No.
P.O. Box 1710, Hobbs, New Mexico 88240   (505)391-1602

10. Field and Pool, or exploratory Area
JALMAT T/Y/7 RIVERS

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FNL & 1980' FEL UNIT G SEC.30, T23S, R37E
R27E

11. County or Parish, State

LEA   NM

12.   CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
☒ Notice of Intent	☐ Abandonment	☐ Change of Plans
	☐ Recompletion	☐ New Construction
☐ Subsequent Report	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
☐ Final Abandonment Notice	☐ Altering Casing	☐ Conversion to Injection
	☒ Other PERF. REMEDIAL WORK	☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

TD 3004' PERFS OH 2972'-3004'

DEEPEN WELL WITHIN JALMAT FROM 3004' TO 3300'

SET 4 1/2" LINER AND CEMENT IN PLACE

PERFORATE JALMAT INTERVAL 2630'-3300' AND STIMULATE

14. I hereby certify that the foregoing is true and correct
Signed _____   Title OPERATIONS COORDINATOR   Date 1-6-94

(This space for Federal or State office use)
(ORIG. SGD.) JOE G. LARA
Approved by _____   Title Petroleum Engineer   Date 1/25/94
Conditions of approval, if any:

* See Instruction on Reverse Side