

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires September 10, 1990

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

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

☒ OIL
WELL

☐ GAS
WELL

☐ OTHER

2. NAME OF OPERATOR

ARCO Oil & Gas Company

3. ADDRESS AND TELEPHONE NO.

P.O. Box 1610, Midland, TX 79702

(915) 688-5672

4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description)

2250 FSL & 1050 FEL (Unit Letter I)
14-25S-37E

5. LEASE DESIGNATION AND SERIAL NO.
LC-060943

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. IF UNIT OR CA, AGREEMENT DESIGNATION

8. WELL NAME AND NO.

South Justis Unit "D" #170

9. API WELL NO.

30-025-32072

10. FIELD AND POOL, OR EXPLORATORY AREA

Justis Blbry-Tubb-Dkrd

11. COUNTY OR PARISH, STATE

Lea County, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐

NOTICE OF INTENT

☒

SUBSEQUENT REPORT

☐

FINAL ABANDONMENT NOTICE

TYPE OF ACTION

☐ ABANDONMENT

☐ RECOMPLETION

☐ PLUGGING BACK

☐ CASING REPAIR

☐ ALTERING CASING

☐ Other

☐ CHANGE OF PLANS

☐ NEW CONSTRUCTION

☐ NON-ROUTINE FRACTURING

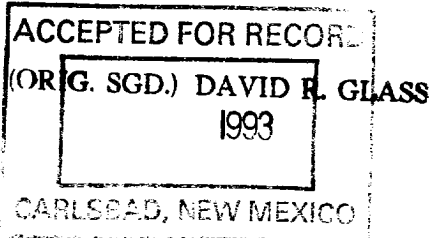
☐ WATER SHUT-OFF

☐ CONVERSION TO INJECTION

(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.)

Spud 12-1/4 hole 11-13-93. TD'd @ 1018. Ran 8-5/8 24# csg to 1018. Cmt'd w/570 sx PSL "C" + 1/4# CS + 2% CC (yld 1.86) followed by 200 sx CI "C" + 2% CC (yld 1.32). Circ cmt to surf. WOC 12 hrs. Est comp strength 1650#. Press test csg to 1000# for 30 min. DA w/7-7/8 bit.



RECEIVED
NOV 18 1 56 PM '93
CARLSBAD, NM

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

SIGNED

Ken W. Gosnell

TITLE Agent

DATE 11-17-93

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS FOR APPROVAL, IF ANY: