

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN
(Other Instru
verse side)LOCATE
ON reForm approved
Budget Bureau No. 42-21424
5. LEASE DESIGNATION AND SERIAL NO.

NM-10191

6. IF INDIAN, ALLIOTTEE OR TRIBE NAME

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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> WIW		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Atlantic Richfield Company		East Shugart Unit #7	
3. ADDRESS OF OPERATOR P. O. Box 1978, Roswell, New Mexico 88201		8. FARM OR LEASE NAME East Shugart Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FSL, 2310' FWL		9. WELL NO. 29	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Shugart-Queen	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3610' CTF		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34, T18S, R31E	
		12. COUNTY OR PARISH Eddy	13. STATE N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Convert to Queen WIW ☒(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

17. 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.)*

Work started 9/10/69. Tagged sand fillup @ 3445'. Sand pumped and cleaned out sand to 3465'. Drld & pushed CIBP to 3540'. (New PBD). Tested 4 1/2" casing to 3000# for 15 min - OK. Perforated Queen sand 3501-3511' w/2 JSPP. Treated perfs w/1500 gal 15% LSTNE-HCl acid. Ran 2-3/8" x 4-1/2" tension packer on 2-3/8" tubing, set packer @ 3276'. Loaded annulus w/treated fresh water. Started water injection in Queen perfs 3306' to 3511'. Work completed 9/15/69.

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ALBUQUERQUE, NEW MEXICO

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

SIGNED

U.D. Dutcher

TITLE

Dist. Drlg. Supervisor

DATE

9-17-69

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD PURPOSES
SEP 18 1969

Date

ACTING

District Engineer

*See Instructions on Reverse Side

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