

Drawer DD

Artesia, NM 88210

UNITED STATES

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN
(Other instr. as on re-

LICATE*

Form approved.
Budget Bureau No. 43-R1424.

6. LEASE DESIGNATION AND SERIAL NO.

NM 0560353

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mable Hale Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT
Undesignated Bone Springs11. SEC., T., R., M., OR S.E. AND
SURVEY OR AREA

Sec. 11-19S-30E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

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 ☒ GAS WELL ☐ OTHER ☐O. C. D.
ARTESIA, OFFICE

2. NAME OF OPERATOR

Great Western Drilling Company

3. ADDRESS OF OPERATOR

P.O. Box 1659, Midland, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

860' FNL & 1,650' FWL, Sec. 11, T-19-S, R-20-E

14. PERMIT NO.

15. ELEVATIONS (Show whether D.F., M., or S.E.)

3,395.4' GL, 3,411.60' KBM

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 ACIDISE

REPAIR WELL

(Other)

FULL OR ALTER CASING

MULTIPLE COMPLETS

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDISING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Process of Completing

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

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 space pertinent to this work.)*

3/19/84: Rigged up pulling unit. Ran 3-3/4" bit, 4 3-1/8" DC & 217 jts J-55 tbg to 8,711.75'

3/20/84: Rigged up reverse unit. Tagged cement @ 8,745'. Drilled cement, plug, float collar & 42' of cement in shoe joint to 8,788'. Circulated hole clean w/140 bbls. fresh water containing 2% KCL, 10 gals. clay ban & 5 gals. M-55-4. Pulled drlg installation & rigged down reverse unit. Rigged up Appolo Perforators. Tagged T.D. @ 8,787'. Set on depth w/open hole logs, with depth changed to 8,784'. Pulled 2,000' cement bond log w/GR & collar locator. Ran 3 1/2" csg gun w/SSBII charges, .38" dia. holes, 19.36" penetration & 22 gram charges. Perforated 8,777' to 8,783' w/7 shots, 1 SPF.

3/21/84: Opened well on slight vacuum. Ran 4 1/2" Baker Model EA-C packer w/out tail pipe, with seating nipple on top on 2-3/8" OD, J-55 Tbg. Set pkr @ 8,725.53'. Installed BOP. Swabbed & recovered 34 bbls. dirty water. Tubing capacity 33.76 bbls.

3/22/84: SITP 20 psi, S.I. 14 hrs. Made 2 swab runs without recovery. Treated well w/ 1,500 gals. 15% HCL containing 6 gals. 1-10, 6 gals. clay ban, 3 gals. M554, 3 gas. TFS 3000, 15 gals. C3L & 14 7/8" ball sealers. Avg. treating pressure 3,100 psi, max. 6,000 psi & avg. rate 2.8 BPM. ISIP 2,100 psi, 5 min. 1,900 psi & 30 min. 400 psi. Displaced acid w/2% KCL fresh water. Total load to recover: 69 bbls. Opened well & flowed back 4 bbls. Swabbed & recovered total of 92 bbls., 23 bbls. over load. Fluid level stabilized @ 3,000-3,500' while swabbing. Sample of fluid on last swab run cut 15% oil, 10% emulsion & 75%

(Cont.)

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

SIGNED

M. H. Myers

ACCEPTED FOR RECORD

TITLE Ass't. to Gen. Supt.

DATE 3-4-84

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL

TITLE

DATE

Carlsbad,

NEW MEXICO *See Instructions on Reverse Side

UNITED STATES
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SUNDRY NOTICES AND REPORTS ON WELLS

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1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Great Western Drilling Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		8. FARM OR LEASE NAME	
		9. WELL NO.	
		10. FIELD AND POOL, OR WILDCAT	
		11. SEC., T., R., M., OR B.M. AND SUBST. OR AREA	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.)	12. COUNTY OR PARISH	13. STATE

16.

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SHOOT OR ACIDIZE

REPAIR WELL

(Other)

FULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

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water. Recovered 23 bbls. over load.

3/23/84: SITP 320 psi - S.I. 13 hours. Commenced swabbing, found fluid level @ 2,200'. Swabbed 11 hours & lowered fluid level to 4,000'. Recovered 139 bbls. fluid, cutting 15% oil & 85% water & emulsion. Have recovered 162 bbls. over load.

3/24/84: SITP 200 psi - S.I. 13 hrs. Ran swab & found fluid level @ 3,500'. Swabbed total of 11 hrs & lowered fluid level to 4,400'. Recovered 152 bbls. fluid cutting 10-15% oil. Fluid analysis of samples listed below, sample 3-21-84 was prior to treatment.



(Cont.)

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5. LEASE DESIGNATION AND SERIAL NO.

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Fluid Analysis

	3-21-84	3-22-84	3-23-84	3-24-84
Na	8,556	65,688	76,303	73,623
Ca	1,600	14,000	2,800	7,200
Mg	96	48	840	288
Cl	16,000	126,000	125,000	127,000
SO ₄	165	289	282	282
HCO ₃	351	288	229	137
Solids	26,768	206,313	205,534	208,530
Fe	10	10	10	10
H ₂ S	Nil	Nil	Nil	Nil
Ph	5.8	5.2	5.5	5.5
SG	1.015	1.155	1.155	1.155
Res.	.2800	.0490	.0490	.0490

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