

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

258
DP

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1170 Rio Brazos Rd., Aztec, NM 87410

JAN - 4 '90

WELL API NO.
30-015-26190

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
B 7717

SUNDRY NOTICES AND REPORTS ON WELLS O.C.D.
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK FOR A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

PJ "A" State

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.

18

2. Name of Operator
Fred Pool Drilling, Inc. ✓

9. Pool name or Wildcat

Ind. Turkey track 'S-O-G-S-A

3. Address of Operator
P.O. Box 1393, Roswell, N.M. 88201

4. Well Location
Unit Letter J : 1650 Feet From The South Line and 1650 Feet From The East Line

Section 2 Township 19S Range 29E NMMN Eddy County

10. Elevation (Show whether DF, RRN, RT, GR, etc.)

3360' Gr

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING
OTHER:

REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB
OTHER:

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. SEE RRR 1101)

December 28, 1989:

Perforated from 2270-2290ft. 20 shots.

December 29, 1989:

Acidized well with 1000 gallons, 15% HCL acid.

Frac well with 40,000 gallons cross link gel and 79,000# 12/20 sand.

December 30, 1989: Put well on pump.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Penta Pool TITLE Vice President DATE 1-2-90

TYPE OR PRINT NAME Penta Pool 505 623 8202 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MKE WILLY
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE FEB 6 1990