

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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"/> Water Injection Well		5. LEASE DESIGNATION AND SERIAL NO NM 17543	
2. NAME OF OPERATOR Citation Oil & Gas Corp.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 2487, Farmington NM 87499		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 1650' FSL, 1800" FWL		8. FARM OR LEASE NAME Hospah	
14. PERMIT NO.		9. WELL NO. 23	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7088' GR		10. FIELD AND POOL, OR WILDCAT Hospah	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 12, T17N, R9W	
		12. COUNTY OR PARISH McKinley	13. STATE NM

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88 JUN 22 AM 10:57
FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input checked="" type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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 zones pertinent to this work.)*

- 6/9/88 MIRUSU. Release pkr. POOH w/tbg. RIH retrievable bridge plug and pkr. Set RBP @ 1650'. Set pkr @ 1589' PT. RBP to 500 psi. Pull up hole to locate casing leaks. Located csg leaks @ 864' - 843' and 676'.
- 6/10-12/88 Set full bore pkr @ 688'. Cmt squeeze leaks from 864'-843' w/65 sx class G cmt w/2% cacl. Final squeeze pressure = 1100 psi. Pull up hole @ reset pkr at 438'. Cmt squeeze holes @ 676' w/30 sx class G cmt w/2% cacl. Final squeeze pressure = 500 psi.
- 6/13/88 RIH w/3-7/8" drill bit. Tag cmt @ 503'. Drill out cmt to 912'. Pressure test csg from surface to 1650' to 500 psi. Held for 15 min.
- 6/19/88 RIH w/4-1/2" lokset pkr. Set @ 1601'. RDMOSU.
- 6/15/88 Pressure test csg to 150 psi w/New Mexico Oil Division witness. Return well to injection.

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

SIGNED [Signature]

TITLE DIVISION ENGINEER

(This space for Federal or State office use)

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

RECEIVED
ACCEPTED FOR RECORD
JUN 27 1988
JUN 23 1988
OIL CON. DIV. BY Smm
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

