

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE DESIGNATION AND SERIAL NO.

Nr-18846

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mountain Federal

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Tomahawk San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 30, T7S, R32E

12. COUNTY OR PARISH

Roosevelt

13. STATE

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.)

RECEIVED BY
MAR 26 1984
O. C. D.
ARTESIA, OFFICE

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Darrell Jackson & Richard Donald Murphree

3. ADDRESS OF OPERATOR
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, NM 88241

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

2310' FNL & 2217' FWL of Sec. 30

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4416 DF

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) _____

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

(Other) Squeeze & reperforate

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.)*

It is proposed to squeeze perfs 4097 to 4158 with 300 sacks cement, re-perforate 4034 to 4070 and treat with 5500 gallons NEFE 15% acid.

RECEIVED
FEB 7 9 58 AM '84
BUSINESS UNIT
ROSEMOUNT DISTRICT

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

SIGNED Walter Waller

TITLE Agent

DATE 2/6/84

(This space for Federal or State Approval)
APPROVED BY PETER W. CHESTER
(Oil Sgd.)

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAR 21 1984

*See Instructions on Reverse Side

RECEIVED
APR 2 - 1984
C.C.D.
LEGISLATIVE OFFICE