

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY  
NM OIL CONSERVATION COMMISSION  
Artesia, NM 88210Form approved.  
Budget Bureau No. 42-R1424.

## 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR Pearson-Sibert Oil Co. of Texas	3. ADDRESS OF OPERATOR 901 West Missouri Avenue, Midland, TX 79701	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' FN&EL's Section 27, T-10-S, R-30-E	5. LEASE DESIGNATION AND SERIAL NO. NM 22637	6. INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME NOV 26 1984	8. FARM OR LEASE NAME R. V. S. - Federal	9. WELL NO. 1	10. FIELD AND POOL, OR WILDCAT Wildcat	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T-10-S, R-30-E	12. COUNTY OR PARISH Chaves	13. STATE NM
14. PERMIT NO. Permit Dated 9-20-84	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4093' GR											

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

## NOTICE OF INTENTION TO:

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

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Drilling Operations	<input checked="" 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.)

11-12-84 - Drilling with 4-3/4" bit on cement retainer @ 3648'.

Ran magnet and mill to remove bit cones.

11-13-84 - Milling and running magnet to remove cones.11-14-84 - Reran 4-3/4" bit. Bit destroyed again. Ran magnet and mill to remove cones.11-15-84 - Milling on metal.11-16-84 - Milling on metal and cement. Ran 4-3/4" bit.11-17-84 - Drilled cement to 3710', cement retainer @ 3710' and cement to 3780'. Circulated hole clean.11-18-84 - Shut down.11-19-84 - Set packer @ 3709' and tested hole. Swabbed dry.11-20-84 - Perforated 3719' to 3749' (11 Intervals/22Holes). Acidized with 1000 gallons 15% HCL. Swabbed treatment back.11-21-84 - Swabbed black formation water, no oil.  
Plan to plug and abandon.

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

SIGNED Robert D. Dethling TITLE Vice President DATE 11-21-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY PETER V. CHESTER TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL IF ANY

DEC 6 1984

\*See Instructions on Reverse Side

RECEIVED

DEC 7 1984

LOS ANGELES

