

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL.  
(Other instructions on  
reverse side)

Form approved  
Budget Bureau No. 1004-1  
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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> API No. 30-025-27189		5. LEASE DESIGNATION AND SERIAL NO. NM 025497
2. NAME OF OPERATOR Oryx Energy Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1861, Midland, TX 79702		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 F, 1880' FNL & 1980' FWL		8. FARM OR LEASE NAME Jennings B Federal
14. PERMIT NO. 30-025-27189		9. WELL NO. 3
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3633' GR		10. FIELD AND POOL OR WILDCAT Northeast Lusk - Yates
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 15, T-19-S, R-32-E
		12. COUNTY OR PARISH Lea
		13. STATE 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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input checked="" type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<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.)

1. MIRU PU. NU BOP. POH W/ RODS & PUMP. DROP SV. TEST TBG TO 5000 PSI. FISH SV. POH W/ 2-3/8" TBG.
2. RIH W/ 5-1/2" RDG PKR & SN ON 2-3/8" TBG. SET PKR @ 2880' W/ 15 PTS COMP.
3. RU DS. NU POPOFF VALVE SET @ 3000 PSI. NU ADJUSTABLE CHOKE & PREPARE SURFACE LINES FOR IMMEDIATE FLOWBACK INTO TANK. PRES UP ANNULUS TO 2000 PSI & MAINTAIN DURING TREATMENT. TEST SURFACE LINES TO 5000 PSI. FRAC YATES PERFS 2958-64' W/ 7500 GAL & 21000# 16/30 HICKORY SD @ 8 BPM, MP 5000 PSI, AS FOLLOWS:
  - A. PUMP 3000 GAL GELLED 10 PPG BRINE PAD
  - B. SHUT DOWN FOR TWICE THE CROSSLINK TIME (3-5 MIN)
  - C. PUMP 1000 GAL GELLED 2% KCL WTR PAD
  - D. PUMP 500 GAL GELLED 2% KCL WTR W/ 2 PPG SD
  - E. PUMP 1000 GAL GELLED 2% KCL WTR W/ 4 PPG SD
  - F. PUMP 2000 GAL GELLED 2% KCL WTR W/ 8 PPG SD
  - G. FLUSH TO END OF TBG (16.7 BBLs) W/ 2% KCL WTR W/ 1/2 GAL FRICTION REDUCER

(Cont. on Pg. 2)

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

SIGNED Mauri L. Perez  
(This space for Federal or State office use)

TITLE Proration Analyst

DATE 4-4-91

APPROVED BY John H. [unclear]  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 4-22-91

\*See Instructions on Reverse Side

RECEIVED

APR 24 1991

OFF

HOBBS

4. FLOW WELL TO TANK IMMEDIATELY (WITHIN 30 SEC OF ISIP) @ 15-20 GPM UNTIL BOTTOMS UP. CONTINUE TO FLOW WELL AT GRADUALLY INCREASED RATES FOR A FEW HOURS AND UNTIL WELL CLEANS UP. RD DS. SWB WELL IF NECESSARY.
5. RLSE PKR & POH. RIH W/ PUMPING SETUP ON 2-3/8" TBG AS BEFORE. ND BOP. NU WH. RIH W/ RODS & PUMP AS BEFORE. HANG WELL ON. RR.

RECEIVED

APR 24 1991

NOBIS