

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.5. LEASE DESIGNATION AND SERIAL NO.
LC 071900-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lea 6015 ARC Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

West Teas

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

9-T20S-R33E

12. COUNTY OR
PARISH

Lea

13. STATE

New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other Salt Water Disposal

b. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other Re-entry F/SWDW

2. NAME OF OPERATOR

SINCLAIR OIL CORPORATION

Sinclair Oil Corporation, Merged

into Atlantic Richfield Company

3. ADDRESS OF OPERATOR

P. O. Box 1920, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660' FSL & 1980' FEL

At top prod. interval reported below

same

At total depth 660' FSL & 1980' FEL

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

Dispose

18. ELEVATIONS (DF, REB, RT, GR, ETC.)*

3541' GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

3300'

21. PLUG, BACK T.D., MD & TVD

3240'

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-3240'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Inj.

3110-3214' Yates

25. WAS DIRECTIONAL
SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

None

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8"OD	32.30#	1357'	12-1/4"	734 sacks circulated	None
7"OD	20#	3022'	8-3/4"	474 sacks circulated	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
5"OD	2974'	3300'	50	

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8"OD	3103'	3103'

31. PERFORATION RECORD (Interval, size and number)

3110-17, 3122-30' w/30 1/2" holes.
3199-3214 w/2 shots per/ft.
3180-3195' w/2 - 1/2"shots per/ft.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3110-3214'	500 gals. M.A.
3110-3214'	2000 gals. 15% Reg. Acid

33. PRODUCTION

DATE FIRST PRODUCTION —SWDW		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Injecting (SWDW)				WELL STATUS (Producing or shut-in) SWD	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

Superintendent

DATE

1-2-69

*(See Instructions and Spaces for Additional Data on Reverse Side)

Orig²cc: USGS, Hobbs

cc: Southern Region (West Texas)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instruction:
reverse side)TE-
re-Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 071900-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lea 6015 ARC Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

West Teas

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

9-T20S-R33E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

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 ☐ GAS WELL ☐ OTHER ☒ Saltwater Disposal	14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)
2. NAME OF OPERATOR SINCLAIR OIL CORPORATION		3541' GR
3. ADDRESS OF OPERATOR P. O. Box 1920, Hobbs, New Mexico 88240		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL & 1980' FEL		

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 COMPLETION ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) <u>Re-enter P&A well & convert</u> ☒ to SWDW	
(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.)*
- 12-1-68 Removed dry hole marker and drilled cement plugs and washed to PBD 3240'.
to Pressure tested casing and liner to 800# for 30 mins. Tested C.K.
- 12-9-68 Ran 2-7/8"OD tubing & Baker Packer Model AD-1 plastic coated to 3054'.
M. A. washed Yates perms. 3110-3214' w/500 gals. Max. Press. 3400#, Min. 2100# @ 1.5 BPM. ISIP 2100#, 10" Press. 1000#. Ran injection tests as follows: 1/2 BPM, 14 Bbls. @ 2000#. 1 BPM, 29 bbls. @ 2100#, 1 1/2 BPM, 44 bbls. @ 2300#.
- 12-22-68 Pulled 2-7/8"OD tubing and packer and perf. additional holes 3180-3195' w/2-1/2" jet slots/foot (total 30 shots) Ran 2-3/8"OD 4.7# Duo-lined coated tubing set in Model AD Plastic coated packer @ 3103' w/7000# tension. Circulated annulus w/treated fresh water. Treated perms. 3110-3117', 3122-3130', 3180-3195', 3199-3214' w/2000 gals. 15 % Reg. acid & 200# rock salt Max. Press. 3800#, Min. 2000# @ 4 BPM. ISIP 2200#, 5" SIP 2000#, no breaks Injection rates ran as follows: 1 BPM for 15 mins. Total 15 bbls. @ 2000#. 1/2 BPM for 15 mins. Total 7 1/2 bbls. @ 1900#. 2 BPM for 15 mins. Total 30 bbls. @ 2500#. Converted P&A Lea 6015 ARC Federal #1 well to Salt Water Disposal Well as the West Teas Salt Water Disposal System effective 12-23-68.

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

SIGNED

TITLE

Superintendent

DATE

1-2-69

(This space for Federal or State office use)

APPROVED BY

TITLE

APPROVED

DATE

CONDITIONS OF APPROVAL, IF ANY:

Orig&4cc: USGS, Hobbs, N.M.

cc: Southern Region (West Texas)

cc: file

*See Instructions on Reverse Side

JAN 10 1969
J. L. GORDON
ACTING DISTRICT ENGINEER

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP
(Other instructions
reverse side)DATE
a re-Form 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 ☐ GAS WELL ☐ OTHER Saltwater Disposal	5. LEASE DESIGNATION AND SERIAL NO. LC 071900-A
2. NAME OF OPERATOR SINCLAIR OIL CORPORATION	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1920, Hobbs, New Mexico 88240	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 660' fSL & 1930' FEL	8. FARM OR LEASE NAME Lea 6015 ARC Federal
14. PERMIT NO.	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3541' GR	10. FIELD AND POOL, OR WILDCAT West Teas
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 9-T20S-R33E
	12. COUNTY OR PARISH Lea
	13. STATE New Mexico

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) ☐	(Other) ☐

(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.) *

12-19-68 Propose to perforate additional section of Yates approx. 3180-95' (15') w/2 jets/ft. Acidize perms. 3110-3214' w/approx. 2,000 gallons 15% acid in 2 stages using 200# rock salt between stages. Hookup for SMD well.

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

SIGNED

TITLE Superintendent

DATE 12-19-68

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Orig&4cc: USGS, Hobbs, New Mex.
cc: Southern Region (West Texas)
cc: file

*See Instructions on Reverse Side
DEC 24 1968
DISTRICT ENGINEER