

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions on
verse side)

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <u>Workover</u>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <u>El Paso Natural Gas Company</u>	8. FARM OR LEASE NAME <u>Harrison Federal</u>
3. ADDRESS OF OPERATOR <u>1800 Wilco Building; Midland, Texas 79701</u>	9. WELL NO. <u>1</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <u>At surface</u> <u>1980 FSL, 660 FWL</u>	10. FIELD AND POOL, OR WILDCAT <u>Jalmat-Yates</u>
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3,019' GL</u>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec 27, T-25-S, R-37-E</u>
	12. COUNTY OR PARISH <u>Lea</u>
	13. STATE <u>NM</u>

16. 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 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"/>	

(Other) Open additional Yates interval X

(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. MOL & RU PU. Remove wellhead & install BOP. Pull rods & 2 7/8" tbg.
2. RU & rn GR Correlation log. RI 2 7/8" work string, set retrievable BP @ 3,050'. Spot 250 gal HCL (3,050-2,900'). Pull tbg. Perf from 2,968-90'.
3. RI w/RTTS on 2 7/8" tbg. Set pkr @ 2,950'. Brk dwn perfs w/1500 gal 15% KCL using ball sealers. Swb test, if additional gas is indicated, frac in 1 stage down tbg w/31,000 gal Foam w/N₂.
4. Blow back immediately until clnd up.
5. Release pkr, retrieve BP. Reset @ 2,825'. Pressure test BP. Spot 250 Double HCL acid (2,825-2,675'). POH, perf 2,805-18', 2,774-82', 2,731-46'. RI w/RTTS on tbg & set pkr @ 2,650'. Break perfs w/2000 gal 15% HCL using ball sealers. Swb tst thru tbg.
6. If additional gas, frac w/11,000 gal Foam w/N₂.
7. Blow back immediately until clnd up.
8. Swb if necessary. Release pkr & retrieve BP. Strip out of hole w/tbg, pkr & BP. PU production string, RI & land tbg @ 3,050'.
9. Remove BOP, replace wellhead. Return well to producing status.

(NOTE: Work started 11-28-77. Verbal OK rec'd from Mr. A. Brown, 11-29-77).

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

SIGNED C. C. Goodwin

TITLE Adm. Prod. Svcs.

DATE 11-29-77

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____