Form 3160-5
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

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 ☐ GAS WELL ☒ OTHER Non-Producing 806-358-0181

2. NAME OF OPERATOR: Bison Petroleum Corporation

3. ADDRESS OF OPERATOR: 5809 S. Western Suite 200, Amarillo, Texas 79110-3607

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 2026' FSL & 1961' FEL

5. LEASE DESIGNATION AND SERIAL NO.: NM-053380

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: Caviness 10 Federal

9. WELL NO.: 1

10. FIELD AND POOL, OR WILDCAT: ~~Corbin Abo~~ Wildcat Ellenburger

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 10 T18S R33E

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3996 DF

12. COUNTY OR PARISH: Lea

13. STATE: NM

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) X Progress report-Recompletion | ☐ | | | (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.)*

10-26-90 Run in hole w/ tubing & swab 177 BLW (previous treatment).
10-27-90 Perf. B.S. 8626-70' OA & 8135-60' w/1 JSPF (50 holes).
Swab well down to 8500', recovering 2 BLW.
10-28-90 Set pkr. @ 8604' and acidize below w/100 gal. 15% HCl & 2000 gal. 10% HCl-3% HF using 40 BS @ 6.7 B/M and 4200#.

10-29-90 Attempt to swab but found debris in tbg & reversed clear. Set RPB @ 8180'. Set pkr. @ 5250' and pressured csg. to 1000# & held w/no loss for 20 minutes. Acid upr. perfs. down tubing w/2000 gal. 20% HCl w/MS @ 4 B/M and 3600# (Break down press. 4000#)
ISIP 2300#. 15-min. SIP 1600#.
10-30-90 SITP 1050#. Retrieve RBP & pkr. Run in tbg to 8680' and swab 76 BLW in 3 hrs. FFL 5245'.
10-31-90 Swab 123 BLW.
11-01-90 SITP 0#. SI for further evaluation.

RECEIVED
DEC 7 | 13 PM '90
CARLSBAD RESOURCE AREA

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

SIGNED [signature] TITLE President DATE 12-4-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: