

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THE INDICATED*
(Other instructions on reverse 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-082
2. NAME OF OPERATOR Atlantic Richfield Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1978, Roswell, New Mexico 88201		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 330' FSL & 990' FWL (Unit letter M)		8. FARM OR LEASE NAME Ballard DE Federal
14. PERMIT NO.		9. WELL NO. 5
15. ELEVATIONS (Show whether ft., m., etc.) 3665' CTF		10. FIELD AND POOL, OR WILDCAT Lynch-Yates/7 Rivers
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22, T20S, R34E		12. COUNTY OR PARISH Lea
		13. STATE N.M.

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) <u>Cement salt water flow</u>	<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.)*

Cemented 7" x 4 1/2" annulus w/150 sx Dowell expanding cement. Displaced cement to 2000'. Pressure at end of mix = 400#; pressure at end of displacement = 700#. Job complete @ 9:10 AM 8/12/71. Pressure on 7" x 4 1/2" annulus after 4 hrs = 500#. Cleaned out sand to 3590'. WOC. Pressure on 7" x 4 1/2" annulus @ 7:00 AM 8/13/71 = 50#. No water flow. Reran tubing and pumping equipment, placed well back on production.

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

SIGNED A.D. Sretcher

TITLE

Dist. Drlg. Supervisor

DATE

8/18/71

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD
AUG 19 1971
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

RECEIVED

AUG 2 1971

OIL CONSERVATION BOARD
HOBBO, I. D.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-082

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Ballard DE Federal

9. WELL NO.
5

10. FIELD AND POOL, OR WILDCAT
Lynch-Yates/7 Rivers

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 22, T20S, R34E

12. COUNTY OR PARISH 13. STATE
Lea N.M.

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

2. NAME OF OPERATOR
Atlantic Richfield Company

3. ADDRESS OF OPERATOR
P. O. Box 1978, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface

330' FSL & 990' FWL (Unit letter M)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3665' CTF

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) Cement salt water flow <input checked="" 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) <input type="checkbox"/>	

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.)*

This well has developed pressure and a salt water flow on the 7" x 4½" casing annulus. A temperature survey shows point of entry of water flow is at 3118'. We propose to cement 7" x 4½" annulus w/150 sx of cement, displacing same to about 2000'.

Verbal approval received from Mr. A. R. Brown on 8/12/71.

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

SIGNED *A. D. Satchers*

TITLE Dist. Drlg. Supervisor DATE 8/13/71

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

APPROVED
AUG 16 1971
ARTHUR S. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side

RECEIVED

AUG 17 1971

OIL CONSERVATION COMM.
HOBBS, N. M.