

UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-068281B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR: HIGHLAND PRODUCTION COMPANY		8. FARM OR LEASE NAME Russell Federal	
3. ADDRESS OF OPERATOR: P.O. BOX 6326, Odessa, Texas 79767-6326		9. WELL NO. 12	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330 FWL & 2340 FSL of Section 20		10. FIELD AND POOL, OR WILDCAT East Mason (Delaware)	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 20, T-26-E, R-32-E, NMPM	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3178.1 GR		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:

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) <input 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) <u>Casing test and cement job</u> <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.) *

5-16-85 - Spud 6:00pm

5-18-85 - Set 1160' of 8 5/8" 24# J-55 ST&C. Cemented with 350 Sacks Halliburton Light + 2% cacl & 1/4 # Flocele. And 200 sacks Class "C" + 2% cacl. Circulated to surface. 30 minutes pressure tested to 900#.

5-23-85 - Set 4,324.59' of 5 1/2" 15.5# API. Cemented with 350 sacks HLC + 15 # Salt, 5# Gilsonite, 1/3 Flocele and 250 sacks of "C" w/ 50/50 poz + 3# Salt, 2% Gel allowed.

I hereby certify that the foregoing is true and correct

SIGNED

TITLE President

DATE July 18, 1985

Marvin L. Smith

(This space for Federal or State office use)

APPROVED BY

ACCEPTED FOR RECORD

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUL 22 1985

*See Instructions on Reverse Side

1992

JUL 25 1963

100

Cementer: Fill in shaded areas.
Operator: Fill in other items.

RAILROAD COMMISSION OF TEXAS
Oil and Gas Division

1. Operator's Name (As shown on Form P 5, Organization Report) HIGHLAND PRODUCTION	2. RRC Operator No.	3. RRC District No.	4. County of Well Site Lea
5. Field Name (Wildcat or exactly as shown on RRC records) East Mason (Delaware)	6. API No. 42-		7. Drilling Permit No.
8. Lease Name Russell Federal	9. Rule 37 Case No.	10. Oil Lease/Gas ID No.	11. Well No. #12

CASING CEMENTING DATA:		SURFACE CASING	INTER-MEDIATE CASING	PRODUCTION CASING		MULTI-STAGE CEMENTING PROCESS	
				Single String	Multiple Parallel Strings	Tool	Shoe
12. Cementing Date		5-18-85					
13. •Drilled hole size		12 1/4					
•Est. % wash or hole enlargement							
14. Size of casing (in. O.D.)		8 5/8					
15. Top of liner (ft.)							
16. Setting depth (ft.)		1160					
17. Number of centralizers used		3					
18. Hrs. waiting on cement before drill-out		18					
1st Slurry	19. API cement used: No. of sacks ▶	350					
	Class ▶	Halliburton Light					
	Additives ▶	2% cacl 1/4# Flocele					
2nd Slurry	No. of sacks ▶	200					
	Class ▶	"C"					
	Additives ▶	2% cacl					
3rd Slurry	No. of sacks ▶						
	Class ▶						
	Additives ▶						
1st	20. Slurry pumped Volume (cu. ft.) ▶	658					
	Height (ft.) ▶	1215					
2nd	Volume (cu. ft.) ▶	264					
	Height (ft.) ▶	410					
3rd	Volume (cu. ft.) ▶						
	Height (ft.) ▶						
Total	Volume (cu. ft.) ▶						
	Height (ft.) ▶						
21. Was cement circulated to ground surface (or bottom of cellar) outside casing?		YES					
22. Remarks Circulated 75 Sacks							

CEMENTING TO PLUG AND ABANDON	PLUG # 1	PLUG # 2	PLUG # 3	PLUG # 4	PLUG # 5	PLUG # 6	PLUG # 7	PLUG # 8
23. Cementing date								
24. Size of hole or pipe plugged (in.)								
25. Depth to bottom of tubing or drill pipe (ft.)								
26. Sacks of cement used (each plug)								
27. Slurry volume pumped (cu. ft.)								
28. Calculated top of plug (ft.)								
29. Measured top of plug, if tagged (ft.)								
30. Slurry wt. (lbs./gal)								
31. Type cement								

CEMENTER'S CERTIFICATE: I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that the cementing of casing and/or the placing of cement plugs in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct, and complete, to the best of my knowledge. This certification covers cementing data only.

Marcus Campbell-Cementer

Name and title of cementer's representative

Box 2568

Address

HALLIBURTON SERVICES

Cementing Company

Hobbs NM 88240

City.

State.

Zip Code

Marcus Campbell

Signature

505 392-6531

Tel.: Area Code Number

5-18-85

Date: mo. day yr.

OPERATOR'S CERTIFICATE: I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct, and complete, to the best of my knowledge. This certification covers all well data.

W. N. Rees

Typed or printed name of operator's representative

Chairman of the Board

Title

W. N. Rees

Signature

810 N. Dixie, Suite 202

Address

Odessa, Texas, 79761

City.

State.

Zip Code

915-332-0275

Tel.: Area Code Number

July 18, 1985

Date: mo. day yr.

Instructions to Form W-15, Cementing Report

IMPORTANT: Operators and cementing companies must comply with the requirements of the Commission's Statewide Rules 8 (Water Protection), 13 (Casing, Cementing, Drilling, and Completion), and 14 (Well Plugging). For offshore operations, see the requirements of Rule 13 (c).

A. What to file. An operator should file an original and one copy of the completed Form W-15 for each cementing company used on a well. The cementing of different casing strings on a well by one cementing company may be reported on one form. Form W-15 should be filed with the following:

- An initial oil or gas completion report, Form W-2 or G-1, as required by Statewide or special field rules;
- Form W-4, Application for Multiple Completion, if the well is a multiple parallel casing completion; and
- Form W-3, Plugging Record, unless the W-3 is signed by the cementing company representative. When reporting dry holes, operators must complete Form W-15, in addition to Form W-3, to show any casing cemented in the hole.

B. Where to file. The appropriate Commission District Office for the county in which the well is located.

C. Surface casing. An operator must set and cement sufficient surface casing to protect all usable-quality water strata, as defined by the Texas Department of Water Resources, Austin. Before drilling a well in any field or area in which no field rules are in effect or in which surface casing requirements are not specified in the applicable rules, an operator must obtain a letter from the Department of Water Resources stating the protection depth. Surface casing should not be set deeper than 200 feet below the specified depth without prior approval from the Commission.

D. Centralizers. Surface casing must be centralized at the shoe, above and below a stage collar or diverting tool, if run, and through usable-quality water zones. In nondeviated holes, a centralizer must be placed every fourth joint from the cement shoe to the ground surface or to the bottom of the cellar. All centralizers must meet API specifications.

E. Exceptions and alternative casing programs. The District Director may grant an exception to the requirements of Statewide Rule 13. In a written application, an operator must state the reason for the requested exception and outline an alternate program for casing and cementing through the protection depth for strata containing usable-quality water. The District Director may approve, modify, or reject a proposed program. An operator must obtain approval of any exception before beginning casing and cementing operations.

F. Intermediate and production casing. For specific technical requirements, operators should consult Statewide Rule 13 (b) (3) and (4).

G. Plugging and abandoning. Cement plugs must be placed in the wellbore as required by Statewide Rule 14. The District Director may require additional cement plugs. For onshore or inland wells, a 10-foot cement plug must be placed in the top of the well, and the casing must be cut off three feet below the ground surface. All cement plugs, except the top plug, must have sufficient slurry volume to fill 100 feet of hole, plus ten percent for each 1,000 feet of depth from the ground surface to the bottom of the plug.

To plug and abandon a well, operators must use only cementers approved by the Director of Field Operations. Cementing companies, service companies, or operators can qualify as approved cementers by demonstrating that they are able to mix and pump cement in compliance with Commission rules and regulations.

Cementer: Fill in shaded areas.
Operator: Fill in other items.

Form W-15
Cementing Report
Rev. 4.1/83
483-045

RAILROAD COMMISSION OF TEXAS
Oil and Gas Division

1. Operator's Name (As shown on Form P 5, Organization Report) Highland Production		2. RRC Operator No.	3. RRC District No.	4. County of Well Site Lea
5. Field Name (Wildcat or exactly as shown on RRC records) East Mason (Delaware)			6. API No. 42-	7. Drilling Permit No.
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CASING CEMENTING DATA:			SURFACE CASING	INTER-MEDIATE CASING	PRODUCTION CASING		MULTI-STAGE CEMENTING PROCESS	
					Single String	Multiple Parallel Strings	Tool	Shoe
12. Cementing Date					05-23-85			
13. •Drilled hole size								
•Est. % wash or hole enlargement								
14. Size of casing (in. O.D.)								
15. Top of liner (ft.)								
16. Setting depth (ft.)								
17. Number of centralizers used								
18. Hrs. waiting on cement before drill out								
1st Slurry	19. API cement used: No. of sacks ▶				350			
	Class ▶				HLC			
	Additives ▶				*			
2nd Slurry	No. of sacks ▶				250			
	Class ▶				**			
	Additives ▶				***			
3rd Slurry	No. of sacks ▶							
	Class ▶							
	Additives ▶							
1st	20. Slurry pumped: Volume (cu. ft.) ▶				690			
	Height (ft.) ▶				3980			
2nd	Volume (cu. ft.) ▶				333			
	Height (ft.) ▶				1922			
3rd	Volume (cu. ft.) ▶							
	Height (ft.) ▶							
Total	Volume (cu. ft.) ▶				1023			
	Height (ft.) ▶				5902			
21. Was cement circulated to ground surface (or bottom of cellar) outside casing?								
22. Remarks * 15 # Salt, 5# Gilsomite, 1/3 Flocele ** C 50/50 poz *** 3# Salt, 2% Gel Allowed								

OVER



CEMENTING TO PLUG AND ABANDON	PLUG # 1	PLUG # 2	PLUG # 3	PLUG # 4	PLUG # 5	PLUG # 6	PLUG # 7	PLUG # 8
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Mike Buckner-Cementer

Halliburton Services

Mike Buckner

Name and title of cementer's representative

Cementing Company

Signature

P.O. BOX 1108

Brownfield, TX 79316

806-637-3591

06-03-85

Address

City

State, Zip Code

Tel.: Area Code Number

Date: mo. day yr.

OPERATOR'S CERTIFICATE: I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct, and complete, to the best of my knowledge. This certification covers all well data.

W. N. Rees

Chairman of the Board

W. N. Rees

Typed or printed name of operator's representative

Title

Signature

810 N. Dixie, Suite 202

Odessa, Texas, 79761

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July 18, 1985

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