

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instruction
verse side)

Budget Bureau No. 1004-0135

Expires August 31, 1983

454

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(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 ☐ MAR 14 '88

2. NAME OF OPERATOR
BURNETT OIL CO., INC. ✓ O. C. D.

3. ADDRESS OF OPERATOR
801 CHERRY STREET, SUITE 1500, FORT WORTH, TX. 76102 ARYTESIA OFFICE

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
UNIT LTR. "E", 1980' FNL, 660' FWL, Sec 1, T17S, R30E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3728' KB 3718.6 GR

5. LEASE DESIGNATION AND SERIAL NO.
NM 2747

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
JACKSON "B"

9. WELL NO.
31

10. FIELD AND POOL, OR WILDCAT
SQUARE LAKE - G-SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
1-17S-30E NMPM

12. COUNTY OR PARISH
EDDY CO.,

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 <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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <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.)

- 1/5/88 Reamed gyp from 4-1/2" csg. to 2725' with bit and scraper. POOH.
- 1/6/88 Ran tension pkr. to 2725'. Established 2.5 BPM pump rate down tbq. POOH.
- 1/7/88 Set 4-1/2" cmt. retainer @ 2725'. Cemented 2725' to 3160' TD w/200 sks. CL H and 200 sks. CL H, 2% CaCl₂. Pressure rose to 1600 psi. Displaced cmt. to retainer @ 2000 psi. Stung out, spot 200' cmt. plug 2725' to 2525'. Displaced 4-1/2" csg. from 2525' to surf. w/9# mud. POOH. Set pkr. @ 1025'. Established pump rate through leaking stage cementer at 1059' 3 BPM @ 180 psi. POOH.
- 1/8/88 Set cmt. retainer @ 1025'. Cemented behind leaking stage cementer with 300 sks. CL H, 15# salt per sack. Stung out, spotted 200' cmt. plug 1025'-825'. Displaced 4-1/2" csg. w/9# mud to surface.
- 1/11/88 TOC 801'. Perforated 4-1/2" csg. 4 holes @ 450'. Broke circulation down 4-1/2" csg. and out 4-1/2" X 8-5/8" annulus. Cemented with 126 sks. CL H, 15.6 ppg. (Mechanical malfunctions prevented planned 54 additional sks. Displaced plug to 376'. WOC 6 hrs. Ran temperature surv. TOC 215'.
- 1/12/88 Perforated 4-1/2" csg. 4 holes @ 205'. Cemented 4-1/2" X 8-5/8" annulus to surface w/ 55 sks. CL H, 2% CaCl₂. Displaced plug to 155'. Circulated 12 sks. good cmt. to pit.
- 1/13/88 Perforated 4-1/2" and 8-5/8" surface csg. @ 150'. Cemented 8-5/8" annulus with 150 sks. CL H, 2% CaCl₂. Left 150' cmt. in 4-1/2" csg. to surface. WOC 6 hrs. ND head, installed dry hole marker as required. Will retain location and road for possible replacement well. Will reclaim pit area as soon as water evaporates and submit additional subsequent notice.

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

SIGNED John C. McPhaul TITLE PRODUCTION SUPERINTENDENT DATE 2/19/88

JOHN C. McPHAUL
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

SJS

CARLISLE, NEW MEXICO

RECEIVED
MAR 10 1988
Post ID-2
3-18-88
PFA