

N. M. O. G. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(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.)

RECEIVED

JUN 23 1976

O. G. C. ARTESIA, OFFICE

1. **OIL WELL** **GAS WELL** **OTHER**

2. **NAME OF OPERATOR**
Cities Service Oil Company

3. **ADDRESS OF OPERATOR**
P. O. Box 1919 Midland, Texas 79701

4. **LOCATION OF WELL** (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1980' FNL, 1980' FEL of Section 22, T-20S, R28E, Eddy County, New Mexico.

14. **PERMIT NO.** _____

15. **ELEVATIONS** (Show whether DF, RT, GR, etc.)
3233' GR

5. **LEASE DESIGNATION AND SERIAL NO.**
NM 17101

6. **IF INDIAN, ALLOTTEE OR TRIBE NAME**

7. **UNIT AGREEMENT NAME**

8. **FARM OR LEASE NAME**
Government-U

9. **WELL NO.**
1

10. **FIELD AND POOL, OR WILDCAT**
Burton Flat Morrow

11. **SEC., T., R., M., OR BLK. AND SURVEY OR AREA**
Sec. 22-T20S-R28E

12. **COUNTY OR PARISH** **13. STATE**
Eddy 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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Reperforate & Acidize <input checked="" 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.)*

T.D. 11,490' Shale, PBTD 11,431'. MIRU completion unit. Load hole with fresh wtr. Release pkr. & seal assy. pull tbg., pkr. & seal assy. set CIBP @ 11,232' to plug off lower Morrow perms. Dump 4 sacks cement on CIBP. New PBTD 11,186'. Perf Upper Morrow w/2 - 0.48" holes each @ 11,001', 11,003', 11,005', 11,102', 11,103', 11,105', 11,106', 11,128', 11,129', 11,130', & 11,131'. Ran 2-7/8" tbg w/Baker loc set pkr. @ 10,882.82'. Gas TSTM. Acidized Upper Morrow perforations 11,001'-11,005', 11,102'-11,106' & 11,128'-11,131' with 3000 gallons 7-1/2% MS acid w/additives, 1000 SCF/bbl N2 and 20-7/8" RCNCB's. Annulus pressured to 1500# - OK. Max. press. 6200#, Avg. TP 5000#, ISIP 4700#, Air 4.3 B/M. opened to pit. Backflowed trace distillate 91 BLW, 5 hrs., GR 4.9 MMCFD, 31/64" choke, FTP 2450#. SI for BHP buildup. 12 hr. SITP 3550#.

On 4 pt. test taken June 8, 1976, well flowed as follows:

Time	Gas Vol.	Choke	FTP	LP
1 Hr.	780 MCFD	10/64"	2850#	490#
1 Hr.	1225 MCFD	12/64"	2782#	490#
1 Hr.	1650 MCFD	14/64"	2655#	490#
1 Hr.	2500 MCFD	16/64"	2500#	490#

Well produced no measurable fluid on test with an absolute open flow of 7827 MCF day.

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

SIGNED [Signature] TITLE Region Oper. Mgr. DATE June 18, 1976

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
JUN 21 1976
H. L. BECKMAN
 ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side