

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-050216

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 GAS WELL OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR

Doyle Hartman

8. FARM OR LEASE NAME

Gregory "B"

3. ADDRESS OF OPERATOR

Post Office Box 10426 Midland, Texas 79702

9. WELL NO.

2

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

660 FNL & 990 FWL (D)

10. FIELD AND POOL, OR WILDCAT

Scarborough (Yates)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 28, T-26-S, R-37-E

14. PERMIT NO.

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

2959.4 G.L.

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) _____

(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.)*

Rigged up well service unit and logged well with GRN-CCL log. Perforated well with a total of 23 shots with one shot each at: 2971, 2979, 2984, 2986, 2992, 3001, 3003, 3018, 3024, 3033, 3036, 3039, 3042, 3045, 3056, 3074, 3079, 3081, 3086, 3088, 3284, 3288, 3293. A/5800 gal of 15% MCA acid. After acid treatment, well pump tested at the rate of 49 BWPD and a show of gas with water entry occurring between 3074' and 3088'. Set CIBP at 3250'. Squeezed perforations 2971-3088 with 294 sx at 1900 psi pump in pressure. Reversed out excess cement. Drilled out retainer and cement and cleaned well out to PBTD of 3242'. Pressure tested perfs to 400 psi. Pressure held okay. Re-perforated upper Yates with a total of 12 shots with one shot each at: 2981, 2983, 2985, 2988, 3002, 3005, 3021, 3030, 3032, 3035, 3038, 3041. Acidized new perforations with 4250 gals of 15% MCA acid. (work performed 12-14-84 thru 1-12-85)

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

SIGNED Michelle Hernandez

TITLE Administrative Assistant

DATE 1-22-85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

JAN 25 1985

*See Instructions on Reverse Side

Michelle Hernandez
NEW MEXICO

RECEIVED

FEB -1 1985

O.C.D.
HOUSE OFFICE