

UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. LEASE DESIGNATION AND SERIAL NO.
NM-26079

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Ochoa Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Undesignated - Wolfcamp

11. SEC., T., S., M., OR BLK. AND SURVEY OR AREA
Sec.15, T-25S, R-33E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

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
The Superior Oil Co.

3. ADDRESS OF OPERATOR
Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1980 FN & EL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
GL - 3369'

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>Plug Back</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.)*

- 8-30-85 MIRU x-perf WS
- 8-31/93-85 Att to rel tbq from mid D pkr @ 14,500.
- 9-4-85 POH w/3020' collapsed tbq, POH w/11,480 coil tbq.
- 9-5-85 Att to rel tbq fr mal D @ 14,500'
- 9-6-85 Cut tbq @ 14,485, left 15' above MOD D, POH w/364 jts. 2-7/8 mod tbq.
- 9-7-85 Set 7-5/8" CIBP @ 14,483 & cap w/35' cmt.
New PBTD = 14,448, perf 4 sqz holes @ 13,790.
- 9-9-85 RIH w/ 7 5/8 pkr - set @ 13,735, circ hole w/1000 bbl + 2% KCL wtr.
- 9-10-85 POH w/tbg & pkr, set 7 5/8" CIBP @ 13,780 cap w/35' cmt, new PBTD = 13,745
- 9-11-85 Perf w/c 13,636-13,663 w/LJSPF, 13,664-13,666 w/2JSPF, 13,667-13,696 w/LJSPF
(total 64 holes), set pkr @ 13,562.
- 9-13-85 Rel pkr, circ hole w/920 bbl 10#BR w/2% KCL, POH w/tbg & pkr, RIH w/ 7 5/8" MOD DB
pkr @ 13,540.
- 9-16-85 Acdz 13,636-13,696 w/6000 gal 15% NeFe HCL acid + 100 RCNBS, fl w/84 bbl
2% KCL wtr.
- 9-17-85 RD x-perf WS, turned well to Production
Open well to Transwestern Gas Co.

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

SIGNED *Nancy Lewis* TITLE MOBIL PRODUCING TX. & N.M., INC. AS AGENT FOR THE SUPERIOR OIL COMPANY DATE 10-4-85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD *PLC*

OCT 17 1985

*See Instructions on Reverse Side

M

RECEIVED
OCT 18 1985
C. J. O.
HODGES OFFICE