

District II - (505) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-26844
5. Indicate Type of Lease: FEDERAL STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM-84729
7. Lease Name or Unit Agreement Name Cuervo Federal
8. Well Number 1
9. OGRID Number 21712
10. Pool name or Wildcat Diamondtail/ Delaware

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> SWD	
2. Name of Operator: Strata Production Company	
3. Address of Operator PO Box 1030, Roswell, NM 88202	
4. Well Location Unit Letter J : 1980 feet from the S line and 1980 feet from the E line Section 14 Township 23S Range 32E NMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3705	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: MIT test <input checked="" type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

**Please see attachment.**

Spud Date:  Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Matt Murphy TITLE Operations Manager DATE 5/18/2021  
 Type or print name Matt Murphy E-mail address: matt@stratanm.com  
 PHONE: 575-622-1127 ext. 33

**For State Use Only**

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 12/9/21  
 Conditions of Approval ...

## District I

1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

## BRADENHEAD TEST REPORT

Operator Name Strata Production Company	API Number 30-025-26844
Property Name Cuervo Federal	Well No. 1

## 7. Surface Location

UL - Lot J	Section 14	Township 23S	Range 32E	Feet from 1980	N/S Line FSL	Feet From 1980	E/W Line FEL	County LEA
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## Well Status

TA'D Well YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR INJ <input checked="" type="radio"/> SWD	PRODUCER OIL NA GAS	DATE 5/4/2021
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## OBSERVED DATA


	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	NA	NA	0	580
Flow Characteristics					
Puff	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	CO2 _____
Steady Flow	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	WTR <input checked="" type="checkbox"/> X
Surges	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	GAS _____
Down to nothing	<input checked="" type="radio"/> Y / N	Y / N	Y / N	<input checked="" type="radio"/> Y / N	If applicable type
Gas or Oil	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	fluid injected for
Water	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	Waterflood

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Failed MIT test

Signature: 	OIL CONSERVATION DIVISION
Printed name: Matt Murphy	Entered into RBDMS
Title: Operations Manager	Re-test
E-mail Address: matt@stratanm.com	
Date: 5/4/2021	Phone: 720-468-3646
Witness:	

KF

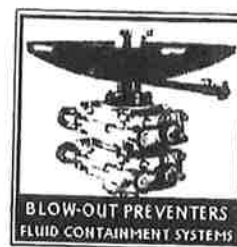
**D & L Meters & Instrument Service, Inc.**

Lovington, NM 88260

P.O. Box 1621

Office: (575) 396-3715

Fax: (575) 396-5812

Date: Thursday, April 29, 2021

Invoice # \_\_\_\_\_

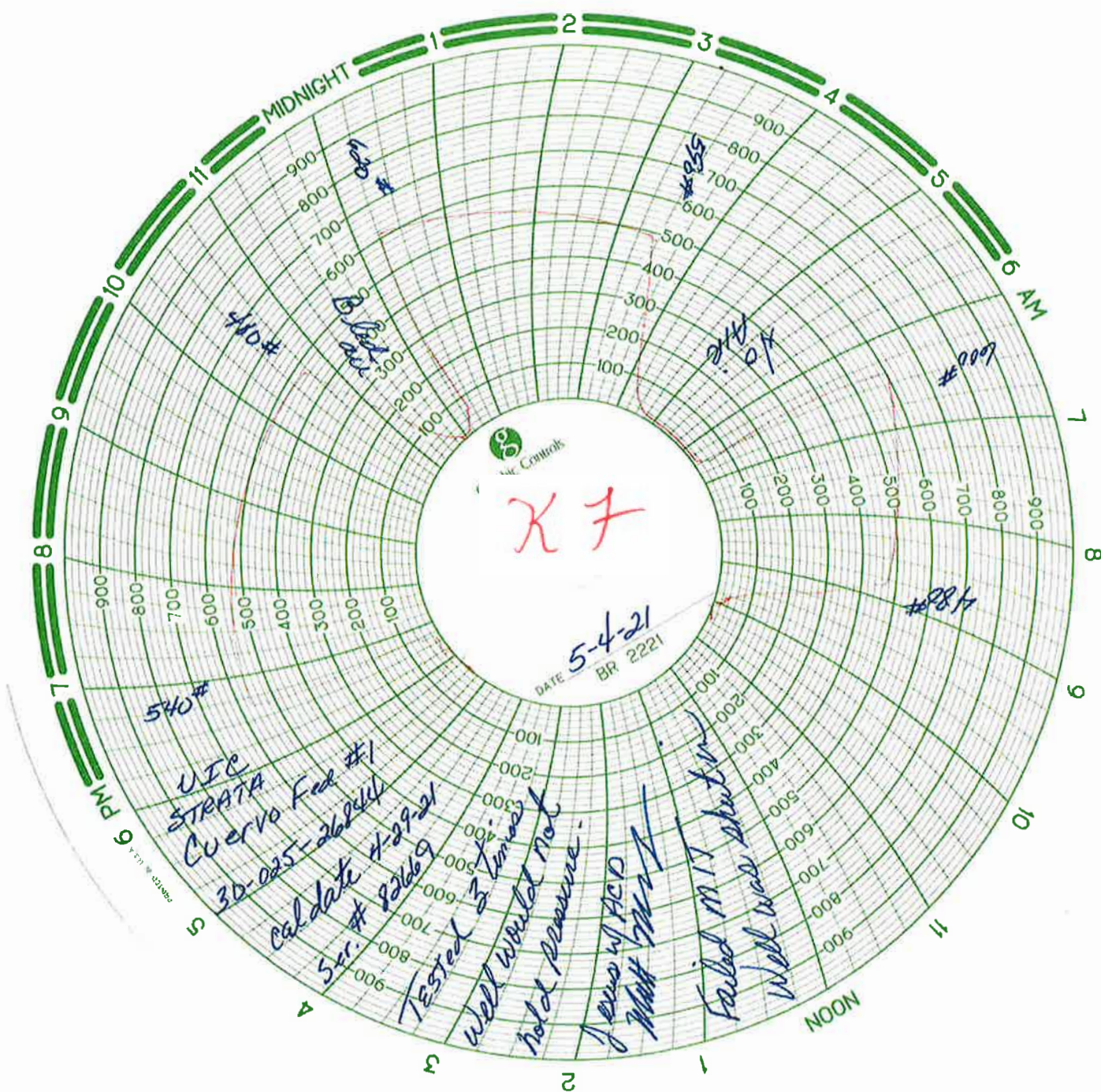
**Certification of Pressure Recorder Test:**

Company:	ACD
Unit:	
Model:	BRISTOLS
Pressure Rating:	1000#
Serial #:	82669

*This Pressure Recorder was tested at midrange for accuracy and verified within +5% and -5% for a 1000# pressure element.*

  
Jesse Arenivas, Technician





State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS

**ATTACHMENT**

13. Describe proposed or completed operations.

This well failed the MIT test on May 4<sup>th</sup>, 2021 and was shut-in. Operator plans to repair the casing leak as follows on or about June 15<sup>th</sup>, 2021:

1. MIRU pulling unit and support equipment
2. Pull tubing and packer
3. Make bit and casing scraper run to PBTD
4. Find and isolate casing leak using on RBP and packer combination
5. Run and set cement retainer +/- 100' above casing leak
6. Squeeze casing leak with +/- 150 sacks of class C neat cement at 14.8 ppg and WOC 24 hours
7. TIH and tag cmt/cement retainer. Pressure test casing to 500 psi for 30 minutes
8. Drill out cement retainer and cement. Pressure test casing to 500 psi for 30 minutes. If pressure does not drop, TOH and lay down workstring, bit and run packer, injection tubing, set packer and re-test casing to 500 psi for 30 minutes. If casing fails to hold pressure, then continue and repeat operation above until the casing leak is successfully repaired.
9. NMOCD will be notified to witness a new MIT test prior to returning this well to disposal.

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**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

CONDITIONS

Action 29012

**CONDITIONS**

Operator: STRATA PRODUCTION CO P.O. Box 1030 Roswell, NM 882021030	OGRID: 21712
	Action Number: 29012
	Action Type: [UF-BHT] Bradenhead Test (BRADENHEAD TEST)

**CONDITIONS**

Created By	Condition	Condition Date
kfortner	Needs passing MIT test after repairs	12/9/2021