

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
811 S. 1st Street
Artesia, NM 88210-2834

C/S F

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Read & Stevens, Inc.

3. Address and Telephone No.
P. O. Box 1518 Roswell, New Mexico 88202

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FSL & 1980' FEL
Section 19 T6S-R27E

5. Lease Designation and Serial No.

NM-18970

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

West Haystack Federal #1

9. API Well No.

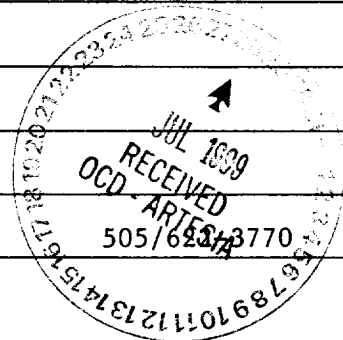
30-005-60290

10. Field and Pool, or Exploratory Area

Haystack Cisco

11. County or Parish, State

Chaves County, New Mexico



12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

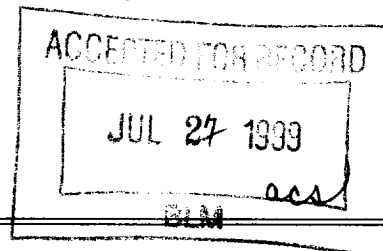
TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other Additional Perforations
Acidize
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

04/13/99 MIRUPU and POH w/ tbg. Perforate additional Cisco pay from 5,578'-82', 5,622'-24', and 5,634'-42' w/ 31 holes. Acidize w/ 3,000 gal of 20% NEFe acid. Swab well, had slight blow of gas after each swab run. Run tbg and put well back down sales line. RDMOPU. Attempt to flow well down sales, well will not unload. Prep to swab and blow.



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

Signed John C. Moberg, Jr.
(This space for Federal or State office use)

Title Operations Manager

Date 7-16-99

Approved by _____
Conditions of approval, if any:

Title _____

Date _____

RECEIVED
JUL 22 1998
FBI
JUL 22 1998