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O.C.D.

ARTESIA OFFICE

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

NM OIL CONS. COMMISSION

Drawer DD

Artesia, NM

Form Approved.

Budget Bureau No. 42-R1424

4/5F

LEASE
NM 036718

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Brotar Federal9. WELL NO.
#3

10. FIELD OR WILDCAT NAME

11. SEC., T., R., M., OR BLK. AND SURVEY OR
AREA
19-15-28E12. COUNTY OR PARISH
Chaves13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3574 G

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR

Mountain States Petro. Corp.

3. ADDRESS OF OPERATOR

P. O. Box 1936 Roswell, New Mexico 88201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 990 FNL & FEL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐☐FRACTURE TREAT ☐☒SHOOT OR ACIDIZE ☐☐REPAIR WELL ☐☐PULL OR ALTER CASING ☐☐MULTIPLE COMPLETE ☐☐CHANGE ZONES ☐☐ABANDON* ☐☐

(other) Update on status of well.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

07-08 thru 07-15-84 Swabbing load.

07-16-84 Prep. to frac.

07-17-84 Morrow sand frac 8737' thru 8744'. Inj. rate 12 bbl. per min. 6000 lbs. press. 14,000# of 20-40 sand. S I for 2 hrs. Flowed back on 1/2" choke. Flowed for 6 hrs. Swabbing.

07-18-84 SITP 800 lbs. Made 3 swab runs and got good fluid return.

07-19 thru 07-24-84 Swabbing.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED K.C. Laverne by RW TITLE Geologist DATE 07/25/84

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

PETER W. CHESTER

TITLE

DATE

JUL 27 1984

*See Instructions on Reverse Side