

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate*
(Other instructions
on reverse side)

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

015F

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different level.
Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Water Injection
2. NAME OF OPERATOR S & J Operating Company
3. ADDRESS OF OPERATOR P. O. Box 2249, Wichita Falls, TX 76307
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

MAR 21 '89

O. C. D.
ARTESIA, OFFICE

1700' FNL & 2310' FWL of Section 35

14. PERMIT NO.

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

3598' GR

5. LEASE DESIGNATION AND SERIAL NO.

LC-050158

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

South Red Lake Grayburg

8. FARM OR LEASE NAME

S. J. Operating Company

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

Red Lake QN-GB-SA

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

Sec. 35, T17S, R27E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.) *

Sand Pumped to 1585'

Perf. Grayburg Sand 1562'-68, 1571'-75' w/4 SPF

Acidize w/500 gals 50-50 mixture of 15% NE acid and Xylene
and 500 gals. NEFE acid

Put well back on injection thru 2 3/8" salt lined tbg w/pkr set @ 1520'
on 10/22/88

RECEIVED
FEB 27 8 52 AM '89
CATTLE
AREA
SOS
CNS

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

SIGNED Sandy Robertson TITLE Petroleum Engineer

DATE 2/22/89

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side