

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
OIL CONS. COMMISSION

SUBMIT IN TRIPPLICATE
(Other instructions
verse side)

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

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.)

RECEIVED BY

AUG 20 1986

O. C. D.

ARTESIA, OFFICE

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW
2. NAME OF OPERATOR Mobil Producing TX & NM Inc. ✓
3. ADDRESS OF OPERATOR 9 Greenway Plaza, Suite 2700, Houston TX 77060
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface 4620 FSL & 660 FEL

5. LEASE DESIGNATION AND SERIAL NO.
LC - 060898 B
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
West Henshaw Premier
Unit Tract 2
9. WELL NO.
1
10. FIELD AND POOL, OR WILDCAT
West Henshaw Grayburg
11. SEC., T., R., M., OR BLM. AND
SURVEY OR AREA
Sec. 3, T-16S, R-30E
12. COUNTY OR PARISH 13. STATE
Eddy NM

14. PERMIT NO. 15. ELEVATIONS (Show whether DV, HT, GR, etc.)

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 PLANE

☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☒

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other)

(NOTE: Report results of multiple completion on Well
Completion or Re-completion 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.)

7-16-86 MIRU Permian WS, Rel pkr & POH w/pkr & tbq, 1 split jt, 1 pin hole, 1 bad collar, tst tbq 3000#-5 min-OK, GIH w/pkr on 90 jts cmt lined 2-3/8 tbq.

7-17-86 pmp 60 bbl 2% KCL dn csg, set pkr @ 2772, tst csg 500#-15 min-OK, witnessed by John Robertson, NMOCD, RDMO, return to injection.

ACCEPTED FOR RECORD

AUG 19 1986

CARLSBAD, NEW MEXICO

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

SIGNED

Nancy Lewis

TITLE

Authorized Agent

DATE

8-4-86

(This space for Federal or State office use)

APPROVED BY

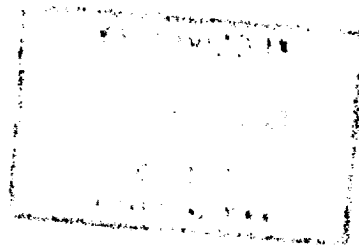
TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Subject to
Like Approval
by State

*See Instructions on Reverse Side



100-1-100-1

100-1-100-1

100-1-100-1
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