

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

SEP 18 1985 DRY 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 proposals.)

1. OIL FIELD, OFFICE, OR OTHER WARTISTIA, OFFICE		Injection well	
2. NAME OF OPERATOR Walsh and Watts, Inc.		8. FARM OR LEASE NAME N. Square Lake Premier Unit	
3. ADDRESS OF OPERATOR 1111 Seventh Street, Wichita Falls, Texas 76301		9. WELL NO. 11	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit letter Q, 1980' FSL & 660' FEL of Section 6, Township 16S, Range 31E of NMPM		10. FIELD AND POOL, OR WILDCAT N. Square Lake (G/SA)	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4012' DF	
		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input checked="" type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(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.) \*

Work commenced on 9-5-85

1. Pulled plastic coated tubing and packer out of hole.
2. Ran in hole with working string, packer and RBP.
3. Set RBP at 3200'.
4. Located casing leak between 600'-700'.
5. Squeezed with 100 sx. Class "C" cement.
6. Drilled out cement.
7. Tested casing to 400 psi. Test witnessed by state inspector.
8. Pulled RBP out of hole.
9. Circulated annulus with inhibitor.
10. Returned well to injection.

Work completed on 9-11-85

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

SIGNED Arvid B. Buehner TITLE Vice-President DATE 9/13/85

(This space for Federal or State office use)

APPROVED BY UNITED FOR RECORD TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

SEP 17 1985

\*See Instructions on Reverse Side