

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

45P

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 proposals.)

NM OIL
Drawn
Artesia

5. LEASE DESIGNATION AND SERIAL NO.

LC 028936-g

6. INDIAN COMMISSION TRIBE NAME

a. NM 66210

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Brigham

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Loco Hills-Q-G-SA

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

Unit I, Sec. 31-17S-30E

14. PERMIT NO.

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

3567' KB

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PCLL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☐

CHANGE PLANS

☐

(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 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.) *

Plugged well as follows:

Tagged existing bridge plug at 2770'. Mixed mud. Spotted 50 sacks cement. (Covered Queen zone at 2335'.) Perforated 4 shots at 1193'. Squeeze perms w/50 sx cement, leaving 100' of cement above perforations. Shut in at 500 psi. WOC overnight. RIH and tagged plug at 960'. RIH and perforated 4 shots at 390'. Squeezed perms w/100 sx cement. Circulated cement to surface. Cut off wellhead. Installed dry hole marker. Cut off anchor. Plugging completed 4-13-87.

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

SIGNED Suzanne Goodlett

TITLE Production Supervisor

DATE 4-16-87

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

4/20/87

*See Instructions on Reverse Side