I hereby certify that the information above is true and complete to the best of my knowledge and belief. HED TITLE	continued
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	continued
	continued
8-7-84.	
corrosion inhibitor & scale preventor plus addit av PSI 2750, max rate 90 bpm, av rate 88 bpm, IS SIP 840 PSI. Shut in at 10:17 AM. Start f	cives. Max PSI 3400, SIP 1020 PSI, 15 min.
PSI establish rate of 60 bpm. Spearhead 2000 Frac down casing w/82,488 gals. of gelled 1% & 20/40 sand, tailed in w/41,000#s 12/20 sand w) gals. 15% HCL acid. KCL carrying 89,000#s w/55 gals. each of
set RBP at 3738', POH to 3706'. Shut down. 08-84 Spot 1000 gals. 15% HCL acid, POOH w/tbg. brea	akdown formation 2400
07-84 Rack & talley in 2 7/8" J-55 tbg. RIH w/RBP, ov	·
02-84 RIH w/4" SSB II select fire guns & perforate 20, 56,68,80,83,3400,88,3504,14,21,30,44,50,60,66,92	, .50" holes @ 3351'
work) SEE RULE 1103.	
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates,	including estimated date of starting any proposed
OTHER COmpletio	
COMMENCE DRILLING OPNS. ULL OR ALTER CASING CASING CASING CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
NOTICE OF INTENTION TO: SUBSE ERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	EQUENT REPORT OF: ALTERING CASING
Check Appropriate Box To Indicate Nature of Notice, Report	Eddy ())))))))))
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
THE East LINE, SECTION 26 TOWNSHIP 185 RANGE 26F	NMPM. (())()()()()()()()()()()()()()()()()()
UNIT LETTER P	Atoka/Glorieta, Yeso
P.O. Box 617, Artesia, NM 88210	1 10. Field and Pool, or Wildcat
Address of Operator	9. Well No.
Name of Operator Ralph Nix	8. Farm or Lease Name Chad
OIL X GAS OTHER.	7. Unit Agreement Name
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 -" (FORM C-101) FOR SUCH PROPOSALS.)	
ARTESIA, OFFICE	5. State Oil & Gas Lease No.
LAND OFFICE O. C. D.	State Fee X
FILE 110 87501	5a. Indicate Type of Lease
DISTRIBUTION P. O. BOX 2088 SANTA FE	Form C-103 - Revised 10-1-7
OIL CONSERVATION DIVISION	