

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVED
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on reverse side)

BLM Roswell District
Modified Form No.
NMO60-3160-4

5. LEASE REGISTRATION AND SERIAL NO.
RECEIVED
IC 864384

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.)

| | | | | | |
|--|--|--|--|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 3a. Area Code & Phone No. 817/559-3355 | | 7. UNIT AGREEMENT NAME CARLISBADER PROPERTIES | |
| 2. NAME OF OPERATOR Breck Operating Corp. ✓ | | RECEIVED APR 27 '90 O.C.D. ANTHONY, OFFICE | | 8. FARM OR LEASE NAME Carter Collier Federal | |
| 3. ADDRESS OF OPERATOR P.O. Box 911, Breckenridge, Texas 76024 | | | | 9. WELL NO. 1 | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit Letter "G"; 2310' FNL & 2310' FEL | | | | 10. FIELD AND POOL, OR WILDCAT Red Lake Queen Grayburg | |
| 14. PERMIT NO. | | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3507' GR | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 5, T-18S, R-27E | |
| | | | | 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"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETION <input type="checkbox"/> | FRACURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input checked="" type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |

(Other) ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROMISED 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.)*

COMPLETED OPERATIONS:

03/28/90: MIRU. POOH w/rods & pump. Lower tbq. & tag PBTD @ 1930'.
Acidize w/ 500 gal. 15% HCl w/ 1 gal. inhibitor. Flush w/
8 bbls. lease water. RIH w/pump & rods. Hang well on.
RDMO. 20 bbl. load water to recover.

03/28/90: Pump -0- BO, 84 BW in 24 hours. -0- bbls. load water to recover.

03/29/90: Pump 3 BO, 80 BW in 20 hours. Lost 62 BO, 20 BW due to leak
in swage on stock tank. Stock tank was repaired and spill
cleaned up.

03/31/90: Pumped 5 BO, 52 BW in 18 hours.

04/01/90: Pumped 6 BO, 51 BW in 24 hours.

04/02/90: Pumped 8 BO, 85 BW in 24 hours.

04/03/90: Pumped 4.5 BO, 35.5 BW in 24 hours.

04/04/90: Pumped 3.25 BO, 40 BW in 24 hours.

ACCEPTED FOR RECORD
Adm

APR 24 1990

CARLSBAD, NEW MEXICO

FINAL REPORT

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

SIGNED

John G. Juncan

TITLE Petroleum Engineer

DATE 4/5/90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: