

NMOCC COPY UN ED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

SUBMIT IN THE ATE*
Other Instructions on re-
(See Side)

Copy to SF

Form approved.
Budget Bureau No. 42-R1424.

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Petroleum Reserve Corporation ✓

3. ADDRESS OF OPERATOR
214 Western United Life Bldg., Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1980' FNL and 660' FEL
Unit H, Section 30, T-18-S, R-30-E.

14. PERMIT NO.

15. ELEVATIONS (Show whether DE, RT, or C.C.)
3474 G.L. **O.C.C. ARTESIA, OFFICE**

5. LEASE DESIGNATION AND SERIAL NO.
NM - 27279

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Elliott Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 30, 18-S, 30-E

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexico

DEC 23 1977

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

NOTICE OF INTENTION TO:

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)			

SUBSEQUENT REPORT OF:

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

Intermediate Casing Report - Drilled 12 1/2" hole to 3450' in lime at 8:00 a.m., 11/28/77. Encountered water flow at 2120'. Controlled flow with 50 psi back pressure on return line. Ran 8 5/8", 32# and 24#, K-55, ST & C casing set at 3450', with D.V. Tool at 2184'. Top of 32# casing at 1331'. Cemented in three stages as follows:

First Stage - 500 sxs. Halliburton "Lite" w/2% Ca.Cl/2, 1/4#/sx. flocele and 5#/sx. gilson-ite followed by 200 sxs. Class "C" w/2% Ca.Cl/2. Plug down at 6:00 p.m., 11/28/77. Opened D.V. Tool and circulated eight hours. Circulated up mud cut cement after three hours.

Second Stage - Cemented with 300 sxs. Halliburton "Lite" w/1/4#/sx. flocele, 5#/sx. gilson-ite and 8#/sx. salt followed by 300 sxs. Class "H" with 3% Ca.Cl/2. Overdisplaced with 15 bbls. brine water. Second stage completed at 3:15 a.m., 11/29/77. WOC eight hours.

Third Stage - Cemented with 50 sxs. Class "C" w/4% gel and 100 sxs. Class "C" w/2% Ca.Cl/2. Dropped plug and closed D.V. Tool at 1:45 p.m., 11/29/77.

Ran temperature survey. Top of cement 1180'. WOC - 18 hours. Tested casing to 1500 psi. O.K. Drilled out 30' cement and D.V. Tool. Tested casing to 1500 psi. for thirty minutes. O.K.

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

SIGNED

TITLE Consulting Engineer

DATE 12-19-77

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING DISTRICT ENGINEER

DATE DEC 22 1977

CONDITIONS OF APPROVAL, IF ANY: