

CORRECTED - COPY

C/SF

(November 1984)  
(Formerly 9-1051)

**BLM - DEPARTMENT OF THE INTERIOR**  
**BUREAU OF LAND MANAGEMENT**

(Other instruction, reverse side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.  
LC 062069

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Roadrunner Federal

9. WELL NO.  
1

10. FIELD AND POOL, OR WILDCAT  
South Leo Queen Grayburg

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Unit J, Sec. 35-T18S-R29E

12. COUNTY OR PARISH  
Eddy

13. STATE  
NM

**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  
MYCO Industries, Inc.

3. ADDRESS OF OPERATOR  
207 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface

1980 FSL & 1980 FEL, Sec. 35-T18S-R29E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3412' GR

**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 PLANT <input type="checkbox"/>
(Other) <input type="checkbox"/>	

**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) <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.)

12-23-84. Spudded 12-1/4" hole 7:45 AM 12-23-84. Set 40' of conductor pipe.  
 Ran 8 joints 8-5/8" 24# K-55 ST&C casing set 336'. 1-Texas Pattern notched guide shoe set 336'. Insert float set 296'. Cemented w/100 sx Pacesetter Lite w/2% CaCl2, 1/4#/sack celloseal and 7#/sack Hiseal. Tailed in w/100 sx Class C w/2% CaCl2. Compressive strength of cement - 1250 psi in 12 hrs. PD 3:15 PM 12-23-84. Bumped plug to 1000 psi, released pressure and float held okay. Cement did not circulate. WOC 6 hours.  
 Ran 1". Tagged cement 231'. Spotted 30 sx C1 C w/4% CaCl2. PD 8:15 PM 12-23-84. WOC 2 hrs and 5 mins. Ran 1". Tagged cement 158'. Spotted 50 sx C1 C w/4% CaCl2. PD 10:40 PM 12-23-84. WOC 1 hr and 50 mins. Ran 1". Tagged cement 150'. Spotted 50 sx C1 C w/4% CaCl2. PD 1:00 AM 12-24-84. WOC 2 hrs. Ran 1". Tagged cement 150'. Spotted 50 sx C1 C w/4% CaCl2. PD 3:30 AM 12-24-84. WOC 2 hrs. Ran 1". Tagged cement 150'. Spotted 25 sx C1 C w/4% CaCl2. PD 6:00 AM 12-24-84. WOC 2 hrs. Ran 1". Tagged cement 126'. Spotted 25 sx C1 C w/4% CaCl2. PD 9:00 AM 12-24-84. WOC 3 hrs. Ran 1". Tagged cement 58'. Spotted 25 sx C1 C w/4% CaCl2. PD 12:30 PM 12-24-84. Cement circulated. WOC. Drilled out 12:15 PM 12-26-84. WOC 69 hours. Nippled up and tested to 1000 psi for 30 minutes, OK. Reduced hole to 7-7/8". Drilled plug and resumed drilling.

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

SIGNATURE [Signature]

TITLE Production Supervisor

DATE 12-27-84

(This space for Federal or State office use)

APPROVED BY [Signature]  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

DEC 31 1984

\*See Instructions on Reverse Side

Carlsbad NEW MEXICO