

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Form approved.
Budget Bureau No. 1004-6125
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM 65392

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

N/A

8. FARM OR LEASE NAME

Compromise AEJ Federal Com

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat Strawn

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

Unit H, Sec. 30-T18S-R27E

14. PERMIT NO.
API #30-015-25665

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3281' GR

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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Perforate, Treat existing zone X

(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.)*

2-10-89. MI RUPU. TOOH w/tubing and packer.

2-11-89. Perforated 8771-8778' w/10 .42" holes as follows: 8771, 72, 72½, 73, 73½, 74, 75, 76, 77, 78'.

2-14-89. Perforated 10 .42" holes as follows: 8498-8501' (2 SPF-6 holes); 8568-8570' (2 SPF-4 holes)

2-15-89. Acidized perfs 8568-70' (4 holes) w/750 gals 15% NEFE acid. Acidized perfs 8498-8501' (6 holes) w/1250 gals 15% NEFE acid.

Swabbed well with show of gas.

Note: RBP set 8657'; Model R packer set 8440'.

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

SIGNED

Janita Dooden

TITLE Production Supervisor

DATE 4-18-89

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

CONDITIONS OF APPROVAL, IF ANY:

DATE

*See Instructions on Reverse Side

SJS

CARLSBAD, NEW MEXICO