

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPL
(Other Instructions
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

• 0293876

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED

7. UNIT AGREEMENT NAME

NOV 30 1981

8. FARM OR LEASE NAME

O. C. D.

Kenwood

ARTESIA, OFFICE

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Shugart Y-SR-Q-GB

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

29-18S-31E

14. PERMIT NO.

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

Unknown

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(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.)

A bradenhead waterflow was repaired on the subject well in the following manner:
POH w 2 3/8" PC tbg & 5 1/2" Pkr. Ran Cmt Bond Log 3732-Surf. Found TOC @ 3250'.
Set CIBP on WL @ 3650. Test CIBP to 1000#. Perf 4 holes @ 3150'. EIR 2 BPM @
950. Set Cmt. Ret on WL @ 3100. Cmt. under Ret thru 2 7/8" tbg w/60Q sx Lite cmt.
w 18# salt/sx & 200 sx cl C neat w/ 2% CA Cl₂ Circ 55 sx cmt. RIH w DC & tbg
Drill out Ret & Cmt to 3150. Test csg to 1000#. Drill out CIBP & clean out to
3833. Ran 2 3/8" PC tbg w/ 5 1/2" tension pkr. Set pkr. @ 3688. Began injection
into pfs 3774-3779.
Work began 10-30-81 and ended 11-5-81.

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

SIGNED

TITLE

District Production Manager

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: