

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPL. COPIES
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 18959

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

ALBERT FEDERAL COM.

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

CEMETERY MORROW

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

Sec. 32, T-19S, R-25E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐ MAR 27 1980 MAR 26 1980

2. NAME OF OPERATOR MONSANTO COMPANY O. C. D. U.S. GEOLOGICAL SURVEY

3. ADDRESS OF OPERATOR ARTESIA, OFFICE ARTESIA, NEW MEXICO

1330 Midland NBT, Midland, Tx. 79701

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

660' FSL & 1980' FEL

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GL 3503

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☒ ABANDONMENT* ☐
(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.)*

1. Rig up pulling unit.
2. Prep to acidize well.
3. Load annulus w/ 2% KCL wtr and pressure to 1500#; held OK.
4. Treat perforations (Morrow) w/ 3000 Gals. 7 1/2% Acid and 5000 StdCuFt Nitrogen.
5. Swab 36 Bbls. of load.
6. Left well on line; flowing 290 MCFPD @ 100# TP.

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

SIGNED

Gene C. Roberts

TITLE Regional Prod. Engr.

DATE 3/25/80

(This space for Federal or State office use)

(Orig. Sgd.) GEORGE H. STEWART

ACTING DISTRICT ENGINEER

APPROVED BY

TITLE

DATE

MAR 26 1980

CONDITIONS OF APPROVAL, IF ANY: