

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM OIL CONS.  
Drawer 10  
Albuquerque, NM

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993  
Designation and Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator Barbara Fasken	3. Address and Telephone No. 303 W. Wall, Suite 1900, Midland, TX 79701 (915) 687-1777	4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1450' FSL & 150' FEL Unit I, Sec. 30, T19S, R27E	5. Well Name and No. Lake McMillan Federal #1	6. If Indian, Allottee or Tribe Name	7. If Unit or CA, Agreement Designat SCR-451	8. Well Name and No. Lake McMillan Federal #1	9. API Well No. 23432 3001523422	10. Field and Pool, or Exploratory Area East Lake McMillan (Wolfca	11. County or Parish, State Eddy, NM
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CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

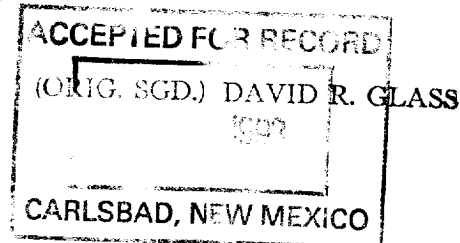
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Completion or Recompletion Report and Log for)

13. 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.)\*

8-17-93 to 8-31-93

1. Killed well, unset pkr., tagged PBTD @ 9689' KB. POW w/tbg. and packer.
2. Ran 5-1/2" packer on 2-3/8" tubing w/1.781" "F" profile nipple and TOSSD. Set pkr. @ 9443' KB.
3. Perforated MORrow Lime 9631-37' and 9651-57', total 14 holes.
4. Acidized perfs w/1000 gals. 15% NEFE HCl.
5. Swabbed well. Tested gas non-commercial.
6. Overnight SITP 580 psi, killed well, release packer, POW w/tbg. and pkr.
7. Set CIBP @ 9540' KB dumped 4 sx Class "H" cmt. on CIBP.
8. Ran 5-1/2" pkr. w/1.781" "F" profile nipple and TOSSD on 2-3/8" tubing to 9383' KB.
9. Perforated Atoka 9436-40' 2 JSPF.
10. Acidized 9436-40' w/500 gals. 7-1/2% SS021 acid.
11. Tested 20 MCFPD after swabbing load water. Shut in.



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

Signed Carl Brown Title Petroleum Engineer Date 9-2-93

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statement or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side