Form 3160-5
(November 195)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*
(Other Instructions on reverse side)

cKF

Basic Bureau 5
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

LC-029388 (d)

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

1. OIL WELL XX GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Marathon Oil Company

RECEIVED BY
APR -7 1987
O. C. D.
ARTESIA, OFFICE

8. FARM OR LEASE NAME

Johnson "B" Federal

3. ADDRESS OF OPERATOR

P. O. Box 552, Midland, Texas 79702

9. WELL NO.

3

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

Unit C, 660' FNL and 1980' FWL

10. FIELD AND POOL OR WILDCAT

Tamano – Bone Springs

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

Sec. 11, T-18-S, R-31-E

14. PERMIT NO.

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

GR: 3735'   KB: 3764.20'

12. COUNTY OR PARISH | 13. STATE

Eddy | New Mexico

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)	
(Other) Add perfs and stimulate XX			

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.) *

Marathon Oil Company proposes to add perforations in the Bone Springs interval at 8118', 39', 55', 69', and 80' (5 holes), and acidize these perforations w/ 1000 gals. 15% HCl NEFE acid. The entire Bone Springs interval (8118' to 8507') will then be fracture treated via 5-1/2" casing with 78,000 gal. gelled water with CO_2 carrying 202,000 pounds of 20/40 mesh sand. Work is scheduled to begin 4/1/87.

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

SIGNED _____ TITLE Engineer DATE March 30, 1987

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 4-6-87

CONDITIONS OF APPROVAL, IF ANY :

*See Instructions on Reverse Side

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 statements or representations as to any matter within its jurisdiction.