

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different formation.
Use "APPLICATION FOR PERMIT" for such proposals.)

RECEIVED BY

OIL WELL ☒ GAS WELL ☐ OTHER ☐

JUL 22 1986

O. C. D.

ARTESIA, OFFICE

2. NAME OF OPERATOR

Siete Oil & Gas Corporation

3. ADDRESS OF OPERATOR

P. O. Box 2523, Roswell, NM 88201

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

At surface

950' FNL, 2310' FWL

5. LEASE DESIGNATION AND SERIAL NO.

NM-2938

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Arco Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Shugart - Y-SR-Q-G

11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA

Sec. 24: T18S, R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether SP, WT, GR, etc.)

3710 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

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANE

(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.)

7/15/86 - Perforated lower Grayburg Zone - 4306' to 4310' - 2 shots per ft. - total 9 shots - Acidized w/500 gal. 15% acid - Traced w/20,000 gal 30# crosslink containing 5,500# 100 mesh - 26,000# 10/40 & 12,000# 12/20 sand.

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

SIGNED

TITLE Production Supervisor

DATE 7/16/86

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUL 21 1986

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO