

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRII
(Other instruction
verse side)

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Form approved.
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 reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.

NM 0560353

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hale 11 Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Benson Bone Spring

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

Sec. 11, T19S, R30E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. PERMIT NO.

30-015-25832

15. ELEVATIONS (Show whether OF, BT, OR, etc.)

3364.4 GL

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Perf

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

17. DESCRIBE PROMISED 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.)*

7-23-88 Perf 8466-8478 (OA) 5 holes 1 SPF

7-24-88 Spot 150 gals 10% SRA, break down formation and swab.

7-28-88 Frac perfs 8466-8578 w/42,000 gals of water, frac 40, 5000# of 20/40 INT-Prop. All fluids contain 25% CO2

7-30-88 GIH w/SN, anchor, tbg, (SN @ 8356, anchor @ 7152). RIH w/pump and rods. Hand well on and turn over to pumper.

Aug 19 12 00 PM '88
CABLED
AREA
CLOS
CLOS

RECEIVED

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

SIGNED

TITLE Production Manager/Engineer

DATE 8-17-88

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

SJS