

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REC'D
(Other Instructions
verse side)
RECL. FEB 10 34 AM '90

BLM Roswell District
Modified Form No.
MD60-3160-4

CLSF

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		2. NAME OF OPERATOR Fred Pool Drilling, Inc.		3a. Area Code & Phone No. 505 623-8202		5. LEASE DESIGNATION AND SERIAL NO. NM 58815	
3. ADDRESS OF OPERATOR P.O.Box 1393, Roswell, N.M. 88201		4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980 FSL and 600 FWL		6. INDIAN, ALLOTTEE OR TRIBE NAME NONE		7. UNIT AGREEMENT NAME WELLS	
14. PERMIT NO. 30-015-26161		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3328' Gr		8. FARM OR LEASE NAME Ronadero Federal		9. WELL NO. 1	
				10. FIELD AND POOL, OR WILDCAT Parkway Delaware		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31: T19S, R30E	
				12. COUNTY OR PARISH Eddy		13. STATE N.M.	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(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.)*

February 9, 1990: RE-perforate 3618 to 3658 with 10 shots.

February 14, 1990: Acidized new perfs with 2000 gallons 7½ % HCL.

February 15, Frac new perfs with 30,000 gallons 70% foam and 55,000# 16/30 Ottawa sand.

February 17, Put well on production.

Note: New perfs are in same reservoir and formation. Production before new perfs: 55 BOPD, 50 BWPD, 100 MCFD; Production after new perfs: 78 BOPD, 50 BWPD, 120 MCFD.

ACCEPTED FOR RECORD

Ar

MAR 6 1990

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

SIGNED *Fred Pool*

TITLE **Vice President**

DATE **2-28-90**

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side