

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-66437

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Aceite Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Section 6-19S-31E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

SEP 21 '90

2. NAME OF OPERATOR

MANZANO OIL CORPORATION

3. ADDRESS OF OPERATOR

P.O. Box 2107, Roswell, NM 88202-2107

O. C. D.
ARTESIA, OFFICE

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

1980' FNL & 1523' FWL

14. PERMIT NO.

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

3523' 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 COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Perf & Treat 7-Rivers Zone

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.) *

8-15-90 Perf 7-Rivers from 2958-72 = 14' w/29 holes. Spot 1 bbl acid across perfs. Acidize w/1500 gallons 15% NE/FE w/clay stabilizer + 41 balls. Total load 55 bbls.

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

SIGNED

Sher Williams

TITLE

Production Clerk

DATE

9-13-90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side