Form 3160-5 (June 1990)	DEPARTMEN	ED STATES # 4. T OF THE INTERIOR AND MANAGEMENT		CORM APPROVED Budget Bates: No.8004.0155 S. Expires: March J., 1993.88
Do not use this	SUNDRY NOTICES s form for proposals to dri	AND REPORTS ON WELL If or to deepen or reentry to R PERMIT—" for such propo	a different reservoir.	NM -2938 .6. If Indian, Allottee or Tribe Name
	SUBMIT	IN TRIPLICATE	KECEIVED	7. If Unit or CA, Agreement Designation
1. Type of Well Gas Other MAR 4 1992				8. Well Name and No.
2. Name of Operator SIETE OIL & GAS CORPORATION O. C. D.				ARCO FEDERAL #4 9. API Well No.
3. Address and Telephone No. P.O. BOX 2523, ROSWELL, NM 88202-2523				none assigned yet 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 23, T185, R31E 710' FNL & 1980' FEL NW 1/4 NE 1/4, Unit Letter B				Shug. Yates-7rves-Q-GB 11. County or Parish, State EDDY, NM
) TO INDICATE NATURE	OF NOTICE, REPOR	
TYPE	F SUBMISSION	transferior en et konst och forkologie	TYPE OF ACTION	Bertalander beiter betretten der berteiten ber
Notice of Intent Abandonment Recompletion				Change of Plans New Construction
Subsc	equent Report	Plugging Back Casing Repair	· • · · · · · · · · · · · · · · · · · ·	Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice		Altering Casing Other	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well
13. Describe Proposed or or give subsurface le	RU L & R Well Se	rvice & Schlumberger ots). RD Schlumberge	nt to this work.)* ran CBL, perfoed	Completion or Recompletion Report and Log form.) any proposed work. If well is directionally drilled, Queen zone 2 3/8 **
2-24-92 Spot 2 bbls acid over perfs, press form., couldn't break, respot 2 bbls acid, formation broke @ 2800 PSI. Acidized w/700 gal 15% HCL @ 4.5 BPM , 1400 PSI, increased to 1550 PSI with ball sealers, no ball out. ISIP-1200, 5 min- 1000 PSI. TOH w/2-3/8" tbg. Frac w/16000 gal 30% XL, 1000 # 100 mesh, 23,300 # 20/40 & 11, 450# 12/20 @ 21 BPM. Max-2900 PSI, min 2000 PSI, avg-2500 PSI, ISIP-1450				
			Ass	2
				ON
				THE NEW AGAIN
14. I hereby certify that the Signed XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	ne foregoing is true and correct	TideENGINEERING	TECHNICIAN	3-6-92
(This space for Federa	d or State office use)	Title		
Conditions of approval	i, if any:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Date