

8910115880

NM-0374057-A

Catchlaw Draw Unit

4

Sec. 24-T21S-R25E

Eddy

NM

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐
2. NAME OF OPERATOR
HALLWOOD PETROLEUM, INC.
3. ADDRESS OF OPERATOR
P. O. Box 378111, Denver, Colorado 80237
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface

1650' FEL & 1650' FNL

3387' KB; 3375' GL

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

☐
☐
☐
☐

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANT

REPAIR WELL

(Other) Recomplete shut-in well

☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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.)

Hallwood proposes to recomplete the subject shut-in well uphole in an attempt to return the well to production.

- TOH with tubing (2 3/8") and packer set at 10,393'.
- Set a CIBP at 10,520' to cover (abandon) perforations at 10,526'-10,538'. Cap this plug with only 3-5 feet of cement as we plan to perforate a zone at 10,498'-10,508'.
- Test plug and casing to a minimum of 500 psig for 30 minutes.
- Run-in-hole with tubing conveyed perforating gun system, packer and tubing. Perforate Morrow zones at:
10,454'-10,474'
10,486'-10,494'
10,498'-10,508'
- Flow test well, run bottomhole pressure test and return to production.

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

SIGNED Eva Kardas

TITLE Production Technician

DATE 1/4/93

(This space for Federal or State official use)

APPROVED BY David A. Glass
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 1-28-93

*See Instructions on Reverse Side