

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Budget Bureau No. 1004-0135

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-070286

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

HUDSON FEDERAL

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

GOLDEN LANE (STRAWN)

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

NW SE 29-20S-30E

12. COUNTY OR PARISH 13. STATE

EDDY

NM

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 ☐ GAS WELL ☒ OTHER

RECEIVED

2. NAME OF OPERATOR

VINTAGE PETROLEUM, INC. ✓

APR - 8 1991

3. ADDRESS OF OPERATOR

4200 ONE WILLIAMS CENTER, TULSA, OK 74172

O. C. D.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.
At surface

U-J, 1650' FSL & 1650' FEL of SEC.

14. PERMIT NO.

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

3394 GR

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

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) SEE BELOW

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

PULL RETRIEVABLE PRODUCTION PKR @ 10952'. TRIP IN HOLE W/ TEST PKR. ISOLATE AND TEST UPPER AND LOWER STRAWN PERFS FOR WATER INFLUX. CEMENT SQUEEZE WATER PRODUCING INTERVAL FOR ISOLATION. DRILL OUT SQUEEZE. RERUN PRODUCTION EQUIPMENT AND PUT WELL ON PRODUCTION.

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

SIGNED

Glenn C. Lee

TITLE SUPERVISOR, AFFAIRS

DATE MARCH 15, 1991

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

4/4/91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side