

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI-SECTION  
(Other instructions on reverse side)  
Artesia, NM 88210

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

C/SR

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. NM-06299
2. NAME OF OPERATOR Amoco Production Company ✓	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 68, Hobbs, NM 88240	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' FSL X 1900' FEL Unit J, NW/4, SE/4	8. FARM OR LEASE NAME Federal G Gas Com
	9. WELL NO. 1
	10. FIELD AND POOL, OR WILDCAT Golden Lane Strawn
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 21-30-30
14. PERMIT NO.	12. COUNTY OR PARISH Eddy
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3337' RDB	13. STATE NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input checked="" type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <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"/>	

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

Propose to squeeze and re-perf in an effort to alleviate water production as follows:

- 1) Release pkr and POH with tbg and pkr assembly.
- 2) RIH and set pkr @ 11100' and test CIBP @ 11660' to 1000 psi.
- 3) Pull pkr up to  $\pm$  10850, set, and establish injection rate into perfs.
- 4) Release pkr and POH
- 5) RIH with cmt retainer and set at  $\pm$  10850'.
- 6) Squeeze perfs 10973-84, 10,992-11,004, and 11,025-42" w/150 sps class H cmt w/add

045 BLM, C 1-JRB 1-FJN 1-CMH

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

SIGNED Mary C. Clark

TITLE Admin. Analyst

DATE 11-27-85

(This space for Federal or State office use)

APPROVED BY Mark Strawn

TITLE

DATE 12-5-85

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

- ⑦ Pull out of retainer and reverse out excess cmt, POH, let cmt set up min of 12 hrs.
- ⑧ Drill out cmt and retainer to 10990'; circulate hole clean.
- ⑨ Test squeeze to 1000 psi, resqueeze if necessary, POH
- ⑩ RIH w/ 3" B gun and perf 10973-84' w/ 4 DPJSPE.
- ⑪ RIH w/ original well hook up and swab well in.
- ⑫ After establishing a sustained gas flow acidize down tbg with 1500 gals 20% HCL + 1500 gals CO<sub>2</sub>.
- ⑬ Flush to perfs w/ 50%-50% HCL-CO<sub>2</sub>.
- ⑭ Shut well in 1 hr, flow back, clean up well and return to production.