| Form 3160-5 (November 1082) BY DEFARTME DOF THE INTERIOR (Other Instruction on re- (Formatic 51350) BY DEFARTME DOF THE INTERIOR (Other Instruction on re- EUREALOOF LAND MARAGEMENT | | Budget Bureau No. 10040135 Expires August 31, 1985 | |
|---|---------------------------------------|---|---------------------|
| | | 5. LEABE DESIGNATION AND BERIAL RO. NM 0554235 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| | | | |
| (Do not use this form fo proposals to drill or to deepen or plug back to a different reser O. C. D. Use "APPLICATION FOR PERMIT-" for such proposals.) | ¥01F. | | |
| 1. ARTESIA. CEFICE | | 7. UNIT AGREEMENT NA | XI |
| WELL & WELL OTHER | · · · · · · · · · · · · · · · · · · · | 8. FARM OR LEASE NAM | · |
| Pennzoil Company | | Penn-Federal | - |
| 3. ADDRESS OF OPERATOR | | 9. WELL NO. | |
| P. 0. Drawer 1828, Midland, Texas 79702-1828 | | 1 | |
| LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 10. FIELD AND POOL, OR WILDCAT | |
| 1980' FN & WL of Sec. 31, T-20-S, R-30-E. | | 11. BBC., T., B., M., OR BLK. AND | |
| 1900 TH & WE OF SEC. 31, T-20-3, K-30-E. | SURVEY OR ARMA | | |
| | | | <u>D-S, R-30-</u> E |
| 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | 12. COUNTY OF PARISH | |
| ЗЗ28' КВ | | l Eddy | I NM |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data | | | |
| NOTICE OF INTENTION TO : | | TENT REPORT OF : | |
| TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF | , | BEPAIRING W | |
| FRACTUBE TREAT MULTIPLE COMPLETE FRACTUBE TREAT | | ALTERING CA | .81NG |
| BHOOT OF ACIDIZE ABANDON* SHOOTING OR AC | IDIZING X | ABANDONMEN | T• |
| REPAIR WELL CHANGE PLANS (Other) (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 settimeted date of starting and | | | |
| proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti- nent to this work.) * | | | |
| 8-2-85 - Commenced WO operations. Installed BOP equipment. POH w/1 $\frac{1}{4}$ " tubing. | | | |
| 8-3-85 - NOWSCO treated perfs w/3000 gals. $7\frac{1}{2}$ % HCL acid. Flushed w/69 bbls. brine water. | | | |
| | | | |
| 8-4-85 - Shut in. | | | |
| 8-5-85 - Shut in. | | | |
| | | | |
| 8-6-85 - Swabbed through 1 ¹ tubing. Recovered 1 BW. | | | |
| | | | |
| 8-7-85 - Tried to swab load back through 1¼" tubing, then through 2-7/8" casing. No fluid recovery either way. FL @ 11,400'. | | | |
| 8-8-85 - Made 6 swab runs. No recovery. Ran 1‡" I.J. tub well. Will evaluate well for possible P&A. | oing and | set @ 11,741' | . Shut in |
| APPROVED FOR 60 MEETIN PERIOD | | | |
| ENDING 10/15/80 | | | • |
| ENDING | | | |
| 18. I hereby certify that the foregoing is true and correct | <u></u> | | · ···· |
| SIGNED _ Chanced P. Koly TITLEAdvanced Engineeri | ng Tech | niciadame <u>8-</u> | 9-85 |
| (This space for Federal or State office use) | <u>-</u> | | <u> </u> |
| APPROVED BY Orig: Sgd; Charles S. Danion TITLE | | DATE | 3-85 |
| CONDITIONS OF APPROVALE IN ANY go. | | | |
| | | | |

*See Instructions on Reverse Side