

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate
(On one side of each
verse side)

DRAWER DD

Artesia, NM

COMMISSION

Form approved.

Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

88210 30-009531-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 <input type="checkbox"/>		FEB 26 1982		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Inexco Oil Company		O. C. D.		8. FARM OR LEASE NAME Majores Federal	
3. ADDRESS OF OPERATOR 910 Wilson Tower, Corpus Christi, Tx. 78476		ARTESIA, OFFICE		9. WELL NO. 2-Y	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 810' FEL & 2080' FSL, Unit Letter I				10. FIELD AND POOL, OR WILDCAT West Indian Basin	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4203.5' GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, T 21 S, R 22 E	
				12. COUNTY OR PARISH Eddy	
				13. STATE New Mexico	

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input checked="" 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.)*

Well was flowing 66 MCFD from Morrow (9107-9126'). This zone was abandoned by setting a Baker "S" bridge plug at 8943' and dumping 35' of cement on top. A Baker "DB" packer was set at 8717'. Schlumberger perforated the interval 8826-44' w/37 holes. Pressure increased to 200 psi in 45 minutes. Halliburton acidized with 4000 gallons of 7-1/2% HCL acid w/1000 scf/bbl of nitrogen. Used 60 ball sealers for diversion. Pumped acid at 4.8 BPM with 5800 psi. Well is flowing 570 MCFD, 7 BCPD, and 0 BWPD with 270 psi FTP.

RECEIVED
FEB 1 1982OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

SIGNED Kenneth T. KarlTITLE Production EngineerDATE 1/29/82

Kenneth T. Karl

(This space for Federal or State office use)

APPROVED BY PETER W. CHESTER
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

FEB 24 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

See Instructions on Reverse Side