

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
NM 88210

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different formation.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. CIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-0556290	
2. NAME OF OPERATOR J.C. Williamson		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 16 Midland, Texas 79701		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 660' FSL & 1980' FEL		8. FARM OR LEASE NAME Canter Federal	
14. PERMIT NO. 30-015-25149		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3306.8' GR		10. FIELD AND POOL, OR WILDCAT East Burton Flat Morrow	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10, T-20-S, R-29-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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Work-over

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

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.)*

- (1) Blow down well to pit, reduce surface pressure to 0#.
- (2) COH w/tubing, LD 3000 feet tubing.
- (3) Set bridge plug @ 8400', put 10' cement on plug, test plug and casing to 2000#.
- (4) Perforate 2 Bone Springs zones @ 8175-8190' and @ 8256-8264' with 21 holes.
- (5) GIH w/tubing and packer, circulate hole w/2% Kcl water.
- (6) Acidize Bone Springs zones w/5000 gallons 15% acid.
- (7) Swab test well.
- (8) If swab test favorable, build treating facilities and battery and put well on production.

Aug 4 10 54 AM '87
CARLSBAD RESOURCE
AREA HEADQUARTERS

RECEIVED

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

SIGNED Jan Foster

TITLE Production

DATE 08-03-87

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side