

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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 reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		MAY -2 '90	
2. NAME OF OPERATOR J.C. Williamson ✓		O.C.D. ADJUD. OFFICE	
3. ADDRESS OF OPERATOR PO Box 16; Midland, TX 79702		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, CR, etc.) 3306.8' GL		10. FIELD AND POOL, OR WILDCAT East Burton Flat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10, T-20S, R-29E	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

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) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETION ☐
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.)*

Set retrievable bridge plug at 5970', test plug to 2000# until holds OK.

Perf 5889-5904' with 1 shot/ft.

Acidize with 2000 gal 7½% NEFE, swab back well, if zone shows to be productive

Frac with 15,000 gal. gelled KCl water w/20,000# 20/40 sand. flow back frac fluid,

Run tubing and rods, put well on production.

ACCEPTED FOR RECORD

Adm

MAY 7 1990

CARLSBAD, NEW MEXICO

RECEIVED
APR 23 8 30 AM '90
CARLSBAD
AREA

RECEIVED

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

SIGNED [Signature]

TITLE AGENT

DATE 4-20-90

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side