

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI
(Other instructi
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-27801

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Tuesday A Federal Com

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Undesignated stratum/Morrison

11. SEC. T. R. M., OR S.E. AND
SURVEY OR AREA

Sec. 3-205-29E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

SUNDRY NOTICES AND REPORTS ON WELLS
(Do not use this form for a permit to deepen or plug back to a different reservoir.
PERMIT-- for such proposals.)

1.

OIL
WELL ☐

GAS
WELL ☒

2. NAME OF OPERATOR

CONOCO INC.

3. ADDRESS OF OPERATOR

P. O. Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)

At surface

Unit E

1400' FNL & 990' FWL

14. PERMIT NO.

30-015-25511

15. ELEVATIONS (Show whether dr., ss., or bedrock)

RECEIVED BY

JUN 16 1986

O. C. D.

ARTESIA OFFICE

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)

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 Ran 76 jts of 98", 36" K-55, ST & C csq and set @ 3230' on 5-7-86
- ② Cmt'd csq w/ 600 sxs Dowell LW-3 cmt and 300 sxs class "C" w/ 2% CaCl₂
- ③ Didn't get any returns. WOC, WITH w/ 1" wash pipe. TOC @ 1600'
- ④ Couldn't get past 1026'. Spot 100 sxs class "C" w/ 2% CaCl₂. WOC 2 hrs.
- ⑤ TOC @ 1026'. Spot 100 sxs class "C" w/ 2% CaCl₂. WOC 2 hrs.
- ⑥ TOC @ 993'. Spot 200 sxs class "C" w/ 2% CaCl₂. WOC 2 hrs. Tag cmt @ 983'. Spot 300 sxs class "C" w/ 2% CaCl₂. WOC 2 hrs.
- ⑦ Tag cmt @ 221'. Spot 135 sxs class "C" w/ 2% CaCl₂. Got cmt returns @ surface, wash out stack. WOC.
- ⑧ Attached is a form showing the initial TOC @ 1600' after the first cmt was pumped.

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

SIGNED

TITLE

Administrative Supervisor

DATE

6-9-86

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE FOR RECORD

RP

JUN 18 1986

*See Instructions on Reverse Side