

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

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

CLSF

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.)

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NOV 06 '87

O. C. D.
ARTESIA OFFICE

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-34246
2. NAME OF OPERATOR PRIMARY FUELS, INC.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR PO BOX 569 HOUSTON TX 77001		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 1719' FSL & 1999' FWL of Section 19		8. FARM OR LEASE NAME PFI Amoco 19 Federal
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3365 GL		10. FIELD AND POOL, OR WILDCAT Happy Valley Morrow Gas
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 19, T22S, R26E
		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 COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other):			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other):	Run & cement casing		
(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.) *

10/18/87 Ran 63 jts 9-5/8" 40# K-55 8R ST&C R3 casing. Set @ 2699'. M&P 100 sx "Thixset" + 10 lb gilsonite + 1/2 lb/sk flocele + 4% CaCl2 14.2 ppg. 750 sx Halco "Lite" CL "C" + 1/2 lb/sk flocele + 3% CaCl2 12.9 ppg. Tail in w/300 sx CL "C" + 3% CaCl2 14.2 ppg. Displ w/201 BFW. Bump plug w/1500 PSI - float held. Circ 300 sx to surf. CIP @ 1500 hrs 10/18/87. WOC 8 hrs.

BLM REPRESENTATIVE: DANIEL CORTEZ

OCT 23 11 07 AM '87
CARTER
AREA
OFFICE

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SJS

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

SIGNED Daniel Cortez TITLE Drilling Superintendent DATE 10/20/87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side