

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP DATE
(Other instruction
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-34246

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

PFI Amoco 19 Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Wildcat *Delaware*

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 19, T22S, R26E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3377.6 GL

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)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Run & cement casing

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.)*

12/22/87

Ran 2 jts 5-1/2" 20# P-110 LT&C + 105 jts 5-1/2" 15.50# J&K-55 ST&C (4606.42'). Land @ 4600'. FC @ 4517'.
RU Halliburton. Pump 10 BFW + 20 sx GS-35 Poz w/Premium Plus (13.8) + 500 gal Flochek 21 + 20 sx GS-35 Poz w/Premium Plus + 500 gal Flochek 21 + 610 sx GS-35 Poz w/Premium Plus + 2% gel + .4% Halad 4 + .2% CFR3 + 5#/sk salt @ 14.1 ppg. Displ w/107.5 BFW. Bump plug w/1500 PSI. Inc press to 2500 PSI & set ECP. Float held. CIP 1516 hrs MST. Full returns. ND BOP's. Set slips w/75000 lbs. Cut 5-1/2, NU tbg head. Test to 3000 PSI.

RELEASED RIG 2300 HRS MST 12/22/87. WOCU.

NOTIFIED BLM CARLSBAD - NO WITNESS

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

SIGNED

Alan Z. Pata

TITLE Mgr-Drlg & Production

DATE

12/23/87

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

JAN 5 1988

*See Instructions on Reverse Side

SJS
CARLSBAD, NEW MEXICO