

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI  
(Other instruction  
verse side)

Form approved.  
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., E., M., OR BLK. AND  
SURVEY OR AREA

Sec 19, T22S, R26E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

PRIMARY FUELS, INC.

3. ADDRESS OF OPERATOR

PO BOX 569 HOUSTON TX 77001

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.)  
At surface

1687' FSL & 2041' FWL of Section 19

14. PERMIT NO.

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

3377.6 GL

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 COMPLETION

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.)\*

12/15/87 Ran 50 jts 8-5/8" 24# J-55 ST&C (2196.85'). Land @ 2190'. FC 2152' Cmt bskt @ 1010', 10 centralizers. RU Halliburton. Pump csg capacity w/FW - 75% returns. Mix & pump 20 sx Premium Plus Thixset + 4% CaCl<sub>2</sub> + 10#/sk gilsonite + 1/4#/sk Flocele @ 14.0 ppg. Pump 500 gal Flocheck 21. Pump 20 sx Premium Plus Thixset + 4% CaCl<sub>2</sub> + 10#/sk gilsonite + 1/4#/sk Flocele @ 14.0 ppg. Pump 500 gal Flocheck 21 + 60 sx Premium Plus Thixset + 4% CaCl<sub>2</sub> + 10#/sk gilsonite + 1/4#/sk Flocele @ 14.0 ppg - pump 600 sx Howco Lite Premium Plus + 1/4#/sk Flocele + 12#/sk salt @ 12.7 ppg. Tail w/250 sx Premium Plus + 2% CaCl<sub>2</sub> @ 14.8 ppg. Displace w/130 BFW. Bump plug w/1300 PSI. Float held. Circ 180 sx to surf. 100% returns last 30 sx. CIP 0350 MST 12/15/87.

BLM REPRESENTATIVE: Dale Carpenter, Carlsbad

12/16/87 Cut 8-5/8" casing. Test to 1500 PSI. Test BOP's to 2075 PSI.

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

SIGNED

*Steve C. Pata*

TITLE Mgr-Drlg & Production

DATE 12/17/87

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

DATE

CONDITIONS OF APPROVAL, IF ANY:

JAN 5 1988

\*See Instructions on Reverse Side

SSS  
CARLSBAD, NEW MEXICO