16

15

## UNITED STATES DEPARTMEN OF THE INTERIOR verse side)

SUBMIT IN TRIPLY lastructions

"E"

Budget Burtan No. 1004-1 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL S

011

BUREAU OF LAND MANAGEMENT

NM = 342466 IF INDIAN, ALLOTTEE OR TRIBE NAME.

| MM | 2/2/16 |  |
|----|--------|--|

| SUNDRY NOTICES                    | AND REPORTS                | ON WELLS                        |
|-----------------------------------|----------------------------|---------------------------------|
| ot use this form for proposals to | drill or to deepen or plug | back to a different reservation |

| ( | (Do not use this form for proposals to drill or to deepen or plug back to a different reservation.  Use "APPLICATION FOR PERMIT—" for such proposals.) |                       |  |       |  |  | 7. UNIT | AGREEMEN | INT NAME                     |   |          |  |
|---|--|-----------------------|--|-------|--|--|---------|----------|------------------------------|---|----------|--|
|   |  | GAS<br>WELL<br>ERATOR |  | OTHER |  |  |         | May 1 (  | <del>9</del> . <b>'8</b> 8 — | ( | OR LEASE |  |

ADDRESS OF OPERATOR PO Box 569 Houston TX 77001

Primary Fuels, Inc.

ARTESIA, OFFICE

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

See also space 17 below.) At surface

1831' FNL & 2577' FEL of Section 19

15 ELEVATIONS (Show whether DF, RT, GR. etc.) 14. PERMIT NO

Sec 19, T22S, R26E 12. COUNTY OR PARISH 13. STATE

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

PFI Amoco 19 Federal

3 Y

10. FIELD AND POOL OF WILDCAT Happy Valley Morrow Gas

Eddv

9. WELL NO.

New Mexico

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

3385.3

| 210                  | CICE OF INTE  | STION TO:            | 1   | SUBSEQUENT RE                       | PORT OF:                 |   |  |
|----------------------|---------------|----------------------|-----|-------------------------------------|--------------------------|---|--|
| 801                  | CICE OF LAIR. | ATION TO             | ·   |                                     |                          |   |  |
| TEST WATER SHUT-OFF  | r             | PULL OR ALTER CASING |     | WATER SHUT-OFF                      | REPAIRING WELL           |   |  |
| TEST WATER SHELT-OFF | · '           |                      | '   | PRACTURE TREATMENT                  | ALTERING CASING          |   |  |
| FRACTURE TREAT       | i             | MULTIPLE COMPLETE    |     |                                     | ABANDON MENT*            |   |  |
| SHOOT OR ACIDIZE     |               | ABANDON*             |     | SHOOTING OR ACIDIZING PLUG BACK     | ABANDONMENT              | X |  |
| REPAIR WELL          | :!            | CHANGE PLANS         | - 1 | (Other) Nork: Report results of mul | tiple completion on Well |   |  |
| (Other)              |               |                      |     | Completion or Recompletion R        | eport and Dog form.      |   |  |

7. 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.)\*

Plug back well as per BLM instructions: 04/27/88

10881-10781' 35 sx Cl "H" Neat 15.6 ppg 35 sx Cl "H" Neat 15.6 ppg 10059-9959' 35 sx Cl "H" Neat 15.6 ppg 9882-97821 No. 3 35 sx Cl "H" Neat 15.6 ppg8344-8244' No. 4 2500-2300' 70 sx C1 "H" + 3% CaCl2 15.6 ppg No. 5

BLM WITNESS: Dale Carpenter - Carlsbad District

Tagged cement 2396'. Mixed & pumped 35 sx Cl "H" + 4% CaCl2 15.6 ppg. Spot plug 2396-2296'. WOC. RIH - tag firm cement 2362'. Would not 04/28/88 pump off w/30K wt. Pumped 150 bbls 2% KCL, displaced hole. Spot 500 gal 10% MSA acid + 1 gal inhib + 1 gal Lo-surf 259 f/2362-2210'.

RELEASED RIG 0100 HOURS 04/29/88. WOCU.

| signed de d | TITLE Drilling Supt. | <b>DATE</b> 4/29/88 |
|--|----------------------|---------------------|
| (This space for Federal or State office use) | <i>[,</i>            | CCEPTED FOTTED TOTO |
| APPROVED BYCONDITIONS OF APPROVAL, IF ANY:   | TITLE                | 14A7 1 3 1037       |

\*See Instructions on Reverse Side

CARELLAD, MERCAREXICO