

Form 3160-5
(July 1989)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECOMMENDATION
OFFICE FOR THE SECRETARY
OF COPIES REQUIRED
Other instructions on reverse side

NM Roswell District
Modified Form No.
NMO60-3160-4

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.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		3a. Area Code & Phone No. 915-684-4561		5. LEASE DESIGNATION AND SERIAL NO. NM 58511	
2. NAME OF OPERATOR Sendero Petroleum, Inc.		8. FARM OR LEASE NAME Pronghorn Fed Comm		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1736, Midland, TX 79702		9. WELL NO. #1		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 660' FS&E lines Sec. 8 API # 30-015-26107		10. FIELD AND POOL, OR WILDCAT Indian Basin Cisco U. Penn		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 8 T21S R23E	
14. PERMIT NO.		15. ELEVATIONS (Show whether OF, ABOVE, or BELOW) G.L. 3987		12. COUNTY OR PARISH Eddy	
				13. STATE NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) set casing	
(Other) <input type="checkbox"/>			

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROMISED 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.)

Commence re-entry on August 7, 1990, drill out cement plugs to 1695'.
August 8, 1990, Drlg and reaming to 4846. 5900' by 8:00 p.m.
August 9, 1990, Drilling at 6700' became stuck. Freepointed tubing above collars on August 10, 1990. Run wash pipe and fish until August 24, 1990. Move in Ziadril #9 rig and retrieve fish (8 drill collars and bit) on August 26, 1990. Run 184 jts. 15.5# and 17.0# casing to 7,650' K.B. with 20 centralizers. Cement with 500 sacks Class H cement modified. Displaced hole with 180 barrels 2% KCL water - bump plug at 10:15 held okay.
August 31, 1990, RU Schlumberger run CBL-CET from 5000'-7650'. Logs indicate good bond in hole top of cement 5200'.
September 1, 1990, Perforate 7244'-50', 7252'-59', 7275'-79', 7346'-52', 7379'-85', 7417'-21', 7432'-36', 7554'-58' with 2 JSPF. Spot 250 gals. 15% HCL across perfs. Set packer at 7155'. Test backside to 500# SION.
September 2, 1990, Acidize w/6000 gallons of 15% HCL, flared gas and load water. Swab good gas and load water until September 5, 1990.
September 5, 1990, Pump 24,000 gals gel water and 23,000 gallons 20% HCL at 6 BPM. Swab and flow gas and acid water until September 8, 1990.
September 8, 1990, Pump 1000 gals of methanol MSR with 1000 SCF Nitrogen to clean up damage. Swab load and gas continuously flaring.
September 11, 1990, Pump 9000 gallons 15% MSR acid with 2000 SCF Nitrogen per barrel. Swab load water and est. 100 mcfpd - 500 mcfpd with water.

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

SIGNED

Russ Boley

TITLE

Vice President

DATE

10-10-90

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

CONFIDENTIAL

*See Instructions on Reverse Side