

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVED
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(Other instructions on re-
verse side)

957
BLM Roswell District
Modified Form No.
NM60-3160-4

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.) MAY 8 1991

1. OIL WELL ☐ GAS WELL ☒ OTHER		O. C. D. ARTESIA OFFICE	
2. NAME OF OPERATOR The Petroleum Corporation of Delaware		3a. Area Code & Phone No. (214) 528-5898	
3. ADDRESS OF OPERATOR 3131 Turtle Creek Blvd., Ste. 400, Dallas, TX 75219			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1830 FNL & 1980 FEL			
14. PERMIT NO. 30-015-26590		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3317 Ground *	
5. LEASE DESIGNATION AND SERIAL NO. NM 0144 698		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME		8. FARM OR LEASE NAME Superior Federal	
9. WELL NO. 9		10. FIELD AND POOL, OR WILDCAT East Burton Flat	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1, T20S, R29E		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:

TEST WATER SHUT-OFF	☐	FILL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETION	☒
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANS	☐
(Other)	☐		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(Other) Testing	☒		

(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.) *

Tested Atoka thru perforations 10961-11233. Well flwd 3030 MCFPD/72 BCPD/ trace wtr w/1250 psi FTP thru 20/64" choke. 18 hr SITP - 4250 psi.

Tested Strawn thru perforations 10770-10824. Well flwd 845 MCFPD/ 12 BCPD/ 12 BWPD w/200 psi FTP thru 2" meter run w/ 1.5" orifice plate. 36 hr SITP - 4889 psi/ SITP - 3700 psi.

Tested Strawn thru perforations 10624-10672. Well flwd 1785 MCFPD/ 96 BCPD/ trace wtr w/ 925 psi FTP thru 20/64" choke. 48 hr SITP - 3833 psi/ SITP - 2800 psi.

Set 5-1/2" Lok-Set packer w/sliding sleeve closed at 10859'. Well is dual completion w/Atoka perforations 10961 - 11233 producing thru tubing and Strawn perforations 10624 - 672 and 10770 - 824 Shut-in on tubing casing annulus.

* Corrected ground level elevation is 3317. Previous filings were incorrect.

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

SIGNED Jean Spunkle

TITLE District Manager

DATE 4-23-91

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side