

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.

RECEIVED

5. Lease Designation and Serial No.  
NM54150-NM6541580

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

O. C. D.

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
Olympic Oil and Gas Corporation

3. Address and Telephone No.  
1000 Louisiana, Suite 6770, Houston, Texas 77002 (713) 659-4900

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
1650' FNL and 1980' FEL  
Section 24, T-20S, R-28-E

8. Well Name and No.  
Spike Federal No. 1

9. API Well No.

10. Field and Pool, or Exploratory Area  
Russell

11. County or Parish, State  
Eddy County, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

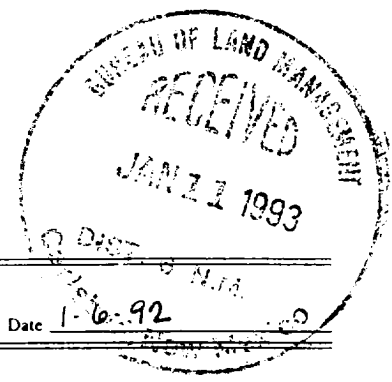
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Open additional production</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

13. 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.)

Open additional pay (test Cherry Canyon) as follows:

MIRU Pride workover unit on 12-8-92, POOH with rods, pump & tubing. Set RBP @ 3900', test to 1500#, RU Dowell, cut 2 each (180° Phasing) Abrasi-jet slots @ 3,113' and 3,118'. Breakdown & acidize with 1000 gal 7-1/2% NEFE, Swab test. Frac with 10,000 gal & 17000# sand. Swab load, rerun pumping equipment. Tested 21 BO, 97 BW & gas TSTM on 12-24-92.



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

Signed [Signature]  
(This space for Property or State Officer)  
Approved by [Signature]  
Conditions of Approval, if any  
JAN 19 1993

Title Sr. Reservoir/Production Engineer

Date 1-6-92

Title \_\_\_\_\_ Date \_\_\_\_\_