-						NM OI	L CONS (OMMI		í	
Form 3160-5 (November 1	983)		LITE	LITED STATES			r Di Tin landi	CATE	Form approved. Budget Bureaus No. 1004-0135 Expires August 31, 1985		
(Formerly 9-3	331)			OF THE IN		R A Other	TIN TWALL Instructions side)	85.4°T	5. LEASE DESIGNATION AN	D SERIAL NO.	
······································	SIIN			ND MANAGE AND REP			<u> </u>		NMNM9818		
(Do	not use this	form for pi	roposals to dri	Il or to deepen of PERMIT" for	or alumbed	to a differen	nt regervoir.		6. IF INDIAN, ALLOTTEE OR 1	THIBE NAME	
OIL WELL OTHER						7. UNIT AGREEMENT NAME					
2 NAMEOFOP		OXY USA	UNC .		No Z	C.	3	1	8. FARM ORLEASE NAME		
3 ADDRESS OF OPERATOR <							FVD/	! 	GOVERNMENT S		
		P.O. BOX		•	19710	₹ KE	383		9.WELLNO.		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)									10. FIELDAND POOL, OR WILDCAT Bone		
At surface								54	OLD MILLMAN RANCH Springs		
1	980 FSL	2130 FE	L NW-SE				0		SURVEY OR AREA		
14. PERMIT NO.			T				JA OI	HE	SEC 3 T20S R2	18E	
	2784500S	Ω1	15 FIEVAII	ONS (Showwheter (DF, RT, GR, etc	•	,+		12. COUNTY OR PARISH	13. STATE	
16.			oronriate R	ov To Indica	to Nature	3277	on Donor		EDDY	NM	
Check Appropriate Box To Indicate Nature of Notices, Report, or								-	Other Data EQUENTREPORTOR:		
TOTO MAY	ershut-off						_			🗀	
FRACTURE			PULL ORALTER (MULTIPLE COMPL	···		Watershu Fracture	it-off Treatment	¥	REPAIRING V ALTERING C		
SHOOT O			ABANDON*			Other	OR ACIDIZING	X	ABANDONM	™ ∐	
REPAIRW (Other)	HT	Ц,	CHANGEPLANS	H		· · · _C	OMPLETII lote: Report re	ON sults of	multiple completion on W	/ell	
proposo	PROPOSED O d work. If this work.)*	well is	directionally	annea, give sub	surface loca	ent details, ar tions and mo	nd five pertine easured and t	ent date: true vert	letion Report and Log forn s, including estimated dat ical depths for all markers	e of starting am	
			TD - 6606'	PBTD -	6560'	PERF	S - 6234'	- 6490	0'		
24, 33, 41, 7-1/2% NE 16/30 SAN CSG TO 50	10 2000# 50, 67, 77, FE HCL AC D, MAXP-1 00#, HELD 378-BW, G FOLLOWS:	f, HELD 89, 94, CID, SW/ 320# IS OK. SI OOD SH	OK. RUN (6400, 05, 1 AB 0-BO 60 IP-950#. C IP-50# RIH IOW OF GA	CBL, TOC-30(6, 23, 35, 40, -BLW IN 5 HF O SAND TO & SWAB 34	80'. PERI 45, 58, 60 RS. FRAC 6560', RII -BO & 140	F BONE S 6, 82, 649 C W/ 7000 H W/ BAK D-BW IN 4	SPRINGS (90' TOTAL 90gal SPE(ER A-3 & 1 1 HRS & W	@ 623 27 HC CTRA 2-7/8" /ELL K	. W/ 150bbl 2% KCL 4, 39, 51, 63, 70, 78 DLES. ACIDIZE W/ FRAC G-3000 W/ 20 TBG & SET @ 6136 SICKED OFF FLOWI JP STACK PAC & F	8, 88, 6305, 2000gal 06000# B', TEST NG FOR	
	TEST 24HRS	FTP	OIL	WATER	GAS	CHO	_	3P			
	24HRS	650 650	509 535	101 76	440 440	18/6 18/6	_	40			
	10HRS	650	230	12	448	18/6	_	40 50			
		CONNE	CT TO AMO	CO @ 1200l				_P			
	24HRS	700	704	48	309	18/6	6 4 3	320			
		NMOC	D DOTENT	INI TERT AIS	17/04						
	24HRS	520	1735	POTENTIAL TEST 4/17/94 1735 393 1120 40/64 320					40.0 API GRAVITY	SAE GOD	
18. Thereby certii									TO AFT GRAVITY	040-GUH	
SIGNED	1/m	18/1		TITLE	REGUL	ATORY A	NALYST		DATE 4/18/94	_	
(This space for Federal or State office use)											
	D BY			TITLE					4		

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fradulent statements or representations as to any matter within its jurisdiction.

*See Instructions on Reverse Side

MAY 27 1994

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CONDITIONS OF APPROVAL, IF ANY: