

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires August 31, 1985
NM OIL CONS. COMM. INSTRUCTIONS
SUBMIT IN TRIPLICATE
(Other) Instructions
(Other) Instructions
Odesa, NM 88210

5. LEASE DESIGNATION AND SERIAL NO. 215F

NM 0275360

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

OIL WELL ☐ GAS WELL ☒ OTHER

RECEIVED BY

JUL -2 1986

O. C. D.
ARTESIA, OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Drag B

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Carlsbad, So. (Canyon, Atoka Gas)

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

Sec 18, T-23-S, R-27-E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. PERMIT NO.

API No. 30-025-20624

15. ELEVATIONS (Show whether DP, ET, GR, etc.)

321761 3238 1 3

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) casing test

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X

(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.)

6-18-86: MI & RU DDU. Installed BOP. Set pkr at 5350', loaded tbg-csg annulus with fresh water. Tested casing to 500 psi for 15 minutes- declined to 460 psi during test interval. COOH w/tbg & pkr & returned well to TA status.

Test witnessed and approved by J. Mirabal.

APPROVED FOR 12 MONTH PERIOD
ENDING 7/1/87

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

SIGNED

N. E. Porter

TITLE Gas Reservoir Engineering

DATE June 26, 1986

Supervisor

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE 7-1-86

CONDITIONS OF APPROVAL, IF ANY: