

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI
DATE
NM (Other Office)
Drawer DD
Artesia, NM 88210

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL NO.

NM-0415461

C/SF

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. OIL WELL ☐ GAS WELL ☐ OTHER Injection FEB 1 10 05 AM '84

2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY

3. ADDRESS OF OPERATOR P. O. Box 68, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
330' FNL X 668' FEL Sec. 19
(Unit A, NE/4 NE/4)

RECEIVED BY
FEB 28 1984
O. C. D.
ARTESIA, OFFICE

14. PERMIT NO.
15. ELEVATIONS (Show whether OF, RT, GR, etc.)
3083.15' RDB

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Old Indian Draw Delaware

9. WELL NO.
11

10. FIELD AND POOL, OR WILDCAT
Indian Draw Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
19-22-28

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 ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☒
REPAIR WELL ☐
(Other) ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

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

(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.) *

Propose to open additional Delaware pay as follows:
Rig up service unit and install BOP. Release packer, pull tubing and packer. Perforate 3246'-3260' with 4 DPJSPF at 90° or 120° phasing. Run in hole with RBP, retrieving head, and packer, with unloader and workstring. Set RBP at 3350'. Raise up and set packer at 3275'. Acidized 3286'-3328' with 2100 gals of 15% NE HCL acid and additives at 1-2 BPM and a max of 1000 psi as follows:

- Open unloader and spot acid in tubing. Close unloader and pump remaining acid.
- Flush acid to perfs with 2% KCL BW.

Release packer and latch onto RBP set at 3350'. Raise up and set RBP at 3275'. Raise up 5' and set packer. Test RBP to 500 psi. Release packer and spot 2 bbl of 15% NE HCL acid and additives across perfs 3246'-3260'. Raise up and set packer at 3150'. Acidize the Delaware interval 3246'-3260' with 1400 gals 15% NE HCL acid containing 1 gal/1000 corrosio inhibitor, 1 gal/1000 c. y stabilizer and 1 gal/1000 iron agent at 1-2 BPM at a max. of 1000 psi as follows:

- Open unloader and spot acid in tubing. Close unloader and pump remaining acid.
- Flush acid to perfs with 2% KCL BW.

Release packer, drop down and latch onto RBP set at 3275'. Reset packer at 3350'. Set packer at 3150'. Swab and release packer. Latch onto RBP set at 3350'. Pull tubing,

0-5-BLM R 1-R-E Odden, HOI Rm. 21.150 1-F. J. Nash, HOI Rm. 4.206 1-PJS 1-NMOCD,A

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

SIGNED Patricia Serna TITLE Assist. Admin. Analyst DATE 1-31-84

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS TITLE DATE

CONDITIONS OF APPROVAL FEB 24 1984

*See Instructions on Reverse Side

packer, and retrieving I d, and RBP. Run in hole with action packer and tubing. Displace casing with packer fluid. Packer set at 3160'. Move out service unit and commence water injection at a max of 300 psi surface injection pressure.