Form 3160-5 November 1983) Formerly 9-331)  DEPARTMENT OF THE INTERIOR  BUREAU OF LAND MANAGEMENTS		Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985  5. LEASE DESIGNATION AND SHEIAL NO.  NM
SUNDRY NOTICES AND REPORTS O  (Do not use this form for proposals to drill or to deepen or plug ba  Use "APPLICATION FOR PERMIT" for such pro	Ck to a different reservoir 199	6. IF INDIAN, ALLOTTEE OR TRIBE NAME 0439875
OIL GAB WELL OTHER Water Injection  2. NAME OF OPERATOR Production Company	CAL	7. UNIT AGREEMENT NAME 91012405 8. FARM OR LEASE NAME Old Indian Draw Unit
3. ADDRESS OF OPERATOR P.O. BOX 3092 Houston, T 4. Location of Well (Report location clearly and in accordance with any S See also space 17 below.) At surface	X 77253	9. WELL NO.   LO   10. FIELD AND POOL, OR WILDCAT   Indian Draw Delaware
SW/4, SW/4 Linit M 330/5 794	/20	11. SEC., T., B., M., OR BLE. AND SURVEY OR AREA Sec 7, Taas Rase
14. PERMIT NO. 15. ELEVATIONS (Show whether DF,		12. COUNTY OR PARISH 13. STATE Eddy NM
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO:	8088 <b>DQ</b> 0	NT REPORT OF:
FRACTURE TREAT  RHOOT OR ACIDIZE  REPAIR WELL  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent proposed work. If well is directionally drilled, give subsurface locations.	Completion or Recomple details, and give pertinent dates,	REFAIRING WELL  ALTERING CASING ABANDONMENT*  of multiple completion on Well tion Report and Log form.) including estimated date of starting any I depths for all markers and sones perti-
1. Ru coil they unit x set up a r 2. RIH W/coil they x wash tool x 2% KCI water until returns a 3. Wash perfs w/ 1000 gals of	clean out to 11 are clean. Nefe acid x circ	. until returns are clean
4. Move coil the 50' above perf	is x close anni 1 & 1/2 BPM x F	lush x acidize perts lush x SI for 1/2 hr.
5. Lower coil that below perfs & p	oump N2 to re	cover 1000 unun
6. POH W/ coil they x RDx retu	m to mjectio	JY C
18. & hereby certify that the foregoing lentrue and correct SIGNED Amelia Hartman TITLE AS	ol.Admin. Ana	lyst 6-29-89
(This space for Eaderal or State office use)  APPROVED BY CONDITIONS OF APPROVAL, IR ANY:	<del>7.1.21.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1</del>	DATE 7-13.89

\*See Instructions on Reverse Side