

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NO OIL COPTS  
SUBMIT IN 0811  
(Other instructions on reverse side)  
ARTESIA, N.M. 80010

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

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS  
RECEIVED

(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

2. NAME OF OPERATOR

SEP 27 '89

Bettis, Boyle & Stovall

3. ADDRESS OF OPERATOR

O. C. D.  
ARTESIA, OFFICE

P. O. Box 1240, Graham, Texas 76046

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

1980' FSL & 660' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3375.1' GR

5. LEASE DESIGNATION AND SERIAL NO.

NM 76972

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Exx Com "17" Fed

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

17-T23S-R26E

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

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANE

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

(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.) \*

GENERAL PROCEDURE TO COMPLETE THE MORROW FORMATION

- 1.) Circulate 200 gallons 15% HCL acid.
- 2.) Displace hole with 2% KCL casing-packer fluid.
- 3.) Pressure test with 1500 psig.
- 4.) Go in hole with tubing conveyed perforating gun - test tubing to 10,000 psig.
- 5.) Set packer at approximately 11,430' K.B.
- 6.) Drop Bar and perforate the Morrow formation from 11,478' to 11,490' with 4 shots/ft., (52 shots).
- 7.) Flow to clean up and test.
- 8.) Shut-in well for pressure build up. (with bomb in hole).
- 9.) Run BHP bomb to determine shut-in pressure; run 4-point isochronal test.

Operations to begin September 11, 1989.

RECEIVED  
SEP 18 8 13 AM '89  
CARE AREA  
PCE  
ERS

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

SIGNED

*Harry M. Bettis, Jr.*

TITLE Harry M. Bettis, Jr., President

DATE 9-15-89

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

9 22 89