NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old C-102 and C-103
Effective 1-1-65

RECEIVED
AUG 19 1974
O. C. C.
ARTESIA, OFFICE

5a. Indicate Type of Lease
State [ ] Fee [X]

5. State Oil & Gas Lease No.

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name

2. Name of Operator
BLACK RIVER CORPORATION

8. Farm or Lease Name
Mayes

3. Address of Operator
620 Commercial Bank Tower Midland, Texas 79701

9. Well No.
1

4. Location of Well
UNIT LETTER I , 2310 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 9 TOWNSHIP 26 RANGE 24 NMPM.

10. Field and Pool, or Wildcat
Wildcat

15. Elevation (Show whether DF, RT, GR, etc.)
3735 Ground Level

12. County
Eddy

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [X]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		OTHER [ ]	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

On June 24, 1974 rigged up Mack Chase Well Service Unit - Pulled Rods and tubing out of hole. Went in hole with Baker Lok-Set Bridging plug and set Bridge Plug @ 548'. Came out of hole and picked up Johnson tension packer. W.I.H. and set packer @ 520'. Acidized well with 750 gallons 7.5% "M.C." acid with 1500 SCF nitrogen per barrel. See enclosed treatment report Recovered approximately 3 barrels acid water and very little nitrogen. W.I.H. with seating nipple on bottom of tubing and set tubing @ 546'. Ran Rods and put well on pump. Well continued to pump water with trace of oil.

On July 2, 1974 pulled rods and pump and opened well on 3/4" choke to clean up. Bottom of tubing @ 520'. Pumped 5,000 SCF nitrogen as pad - acidized well with 2,000 gallons "M.S." acid using [illegible] stopper. Flushed with nitrogen. See enclosed treatment report. Flowed well for two (2) hours, then rigged swab and swabbed well one hour. Lowered bottom of tubing to 5[illegible]'. Ran Rods & Pump in well. Began pumping acid water.

On July 17, 1974 rigged up Western Company to prepare for fracture treatment. Pumped 5,000 SCF nitrogen pad with 2000 gallons [illegible] M.S. acid with 1,500 lbs 20-40 sand and flushed with 2% [illegible] water. See enclosed treatment report. Returned tubing to bottom and began flowing well back. Good recovery of load. Put rods and pump in well then started pumping back load with trace of oil.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [signature] TITLE Vice President DATE August 1?, 1974

APPROVED BY W. A. Gressett TITLE OIL AND GAS INSPECTOR DATE AUG 20 1974

CONDITIONS OF APPROVAL, IF ANY:

THE WESTERN COMPANY

Form PS-8 (Rev. 11/66)

"Engineered Well Services"

GENERAL OFFICES — FORT WORTH, TEXAS

TREATMENT REPORT

DATE: 6-24-74

Western District: Artesia, New Mexico Field Receipt No. ______ Stage No. 1

Operator: [illegible] Corp. Lease: Mayes Well No. #1

Field: [illegible] Location: ______ County: [illegible] State: [illegible]

WELL DATA:

New Well ______ Old Well ✓ Depth TD/PB [illegible] Formation [illegible]

Size Tubing [illegible] Tubing Perf. ______ Type Packer [illegible] Set At [illegible]

Size Casing ______ Wt. ______ Set From ______ To ______

Size Liner ______ Wt. ______ Set From ______ To ______

Open Hole: Size ______ From ______ To [illegible]

Casing Perfs: Size ______ No. Per Ft. [illegible] Intervals [illegible]

Previous Treatment ______ Prior Production ______

TREATMENT DATA:

Hole Loaded With ______

Treating Fluid: [illegible]

Propping Agent ______

Auxiliary Materials: [illegible]

Ball Sealers: [illegible] in [illegible] Stages ______

HHP Used: [illegible]

Procedure: [illegible]
[illegible] flush [illegible]

CAPACITIES & FLUID PUMPED:

Tubing Cap. [illegible]

Casing Cap. [illegible]

Annular Cap. ______

Open Hole Cap. ______

Fluid to Load ______

Pad Volume ______

Treating Fluid: [illegible]

Flush: [illegible]

Overflush ______

Total to Recover: [illegible]

Time AM/PM	Treating Pressure-Psi Tubing	Treating Pressure-Psi Casing	Bbl Fluid Pumped	Inj. Rate BPM	REMARKS—
[illegible]	200				[illegible]
[illegible]	200	0			[illegible]
[illegible]	[illegible]	0	[illegible]	[illegible]	[illegible]
[illegible]	1200		[illegible]	[illegible]	[illegible]
		0			[illegible]

Treating Pressure: Min. [illegible] Max. [illegible] Avg. [illegible]

Inj. Rate On Treating Fluid ______

Inj. Rate On Flush ______

Avg. Inj. Rate ______

HHP ______ Type [illegible]

Final Shut-in Pressure [illegible] in [illegible] min.

Operator Maximum Pressure [illegible]

Customer Representative [illegible]

Western Representative [illegible]

Distribution ______

Form PS-8 (Rev. 11/65)

[illegible] WELL SERVICING COMPANY

"Engineered Well Services"

GENERAL OFFICES — FORT WORTH, TEXAS

TREATMENT REPORT

DATE: 7-23-[illegible]

Western District [illegible] Field Receipt No. 87520 Stage No. 1

Operator [illegible] Lease [illegible] Well No. 1

Field [illegible] Location [illegible] County [illegible] State [illegible]

WELL DATA:

New Well ____ Old Well X Depth TD [illegible] PB 5[illegible] Formation Delaware

Size Tubing 2 [illegible] Tubing Perf. [illegible] Type Packer [illegible] Set At [illegible]

Size Casing [illegible] Wt. 12 Set From 0 To [illegible]

Size Liner [illegible] Wt. [illegible] Set From [illegible] To [illegible]

Open Hole: Size [illegible] From [illegible] To [illegible]

Casing Perfs: Size [illegible] No. Per Ft. [illegible] Intervals [illegible]

Previous Treatment [illegible] Prior Production [illegible]

TREATMENT DATA:

Hole Loaded With [illegible]

Treating Fluid [illegible]

Propping Agent [illegible]

Auxiliary Materials [illegible]

Ball Sealers: [illegible] in [illegible] Stages of [illegible]

HHP Used [illegible]

Procedure [illegible]

CAPACITIES & FLUID PUMPED:

Tubing Cap. [illegible]

Casing Cap. [illegible]

Annular Cap. [illegible]

Open Hole Cap. [illegible]

Fluid to Load [illegible]

Pad Volume [illegible]

Treating Fluid [illegible]

Flush [illegible]

Overflush [illegible]

Total to Recover [illegible]

Time AM/PM	Treating Pressure-PSI Tubing	Casing	BBl Fluid Pumped	Inj. Rate BPM	REMARKS
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Treating Pressure: Min. [illegible] Max. [illegible] Avg. [illegible]

Inj. Rate On Treating Fluid [illegible]

Inj. Rate On Flush [illegible]

Avg. Inj. Rate [illegible]

I.S.D.P. [illegible] Type Fluid [illegible]

Final Shut-In Pressure [illegible] Min. [illegible]

Operator Representative [illegible]

Witness Representative [illegible]

Distribution [illegible]

Form PS-8 (Rev. 11/66)

THE [illegible]

"Engineered Well Services"

GENERAL OFFICES — FORT WORTH, TEXAS

TREATMENT REPORT

DATE: 7-17-74

Western District Hobbs New Mexico Field Receipt No. 9d237 Stage No. 1

Operator Black River Corp. Lease Myers Well No. #1

Field [illegible] Location [illegible] County [illegible] State New Mexico

WELL DATA:

New Well [illegible] Old Well yes Depth 5520 Formation Yates Seven Rivers

Size Tubing 2 3/8" Tubing Perf. [illegible] Type Packer [illegible] Set At [illegible]

Size Casing [illegible] Wt. [illegible] Set From [illegible] To 5520

Size Liner [illegible] Wt. [illegible] Set From [illegible] To [illegible]

Open Hole: Size [illegible] From [illegible] To [illegible]

Casing Perfs: Size [illegible] No. Per Ft. [illegible] Intervals [illegible]

Previous Treatment [illegible] Prior Production [illegible]

TREATMENT DATA:

Hole Loaded With [illegible]

Treating Fluid [illegible]

Propping Agent [illegible]

Auxilliary Materials [illegible]

Ball Sealers: [illegible] in [illegible] Stages of [illegible]

HHP Used [illegible]

Procedure [illegible]

CAPACITIES & FLUID PUMPED:

Tubing Cap. [illegible]

Casing Cap. [illegible]

Annular Cap. [illegible]

Open Hole Cap. [illegible]

Fluid to Load [illegible]

Pad Volume [illegible]

Treating Fluid [illegible]

Flus [illegible]

Overflush [illegible]

Total to Recover [illegible]

Time A.M./P.M.	Treating Pressure PSI Tubing	Treating Pressure PSI Casing	BBL Fluid Pumped	Inj. Rate BPM	REMARKS
[illegible]					

Treating Pressure: Min. [illegible] Max. [illegible] Avg. [illegible]

Inj. Rate On Treating Fluid [illegible]

Inj. Rate On Flush [illegible]

Avg. Inj. Rate [illegible]

I.S.D.P. [illegible] Type [illegible]

Final Shut-In Pressure [illegible] In [illegible]

Operator On Treating Pressure [illegible]

Customer Representative [illegible]

Western Representative [illegible]

Distribution [illegible]