

DEPARTMENT OF THE INTERIOR
 BUREAU OF LAND MANAGEMENT

 NM OIL CONS. COMMISSION
 Drawer DD

SUNDRY NOTICES AND REPORTS ON WELLS 88210

 (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.)

RECEIVED BY

AUG 15 1985

 O. C. D.
 ARTESIA, OFFICE

 1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

J.C. Williamson

3. ADDRESS OF OPERATOR

P.O. Box 16 Midland, Texas 79702

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

1980' FSL & 660' FWL

14. PERMIT NO.

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

2918.5 GR

5. LEASE DESIGNATION AND SERIAL NO.

NM 35607

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

UCBHWW Federal

9. WELL NO.

2

10. FIELD AND POOL OR WILDCAT

Brushy Draw Delaware

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

Sec. 25

T-26-S, R-29-E

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:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

(Other)

(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.)

Request approval to Acidize & Fracture treat the UCBHWW Federal #2 as follows:

- 1) Rig up recompletion unit, pull rods and tubing, GIH w/tubing and packer, set packer @ 5300'. Test lower pipe to 4000#.
- 2) Set bridge plug at approx. 5300'. Test to 2000#
- 3) Reperforate well from 5117-5161' w/17 holes.
- 4) Reacidize Williamson Sand w/3000 gal. 7 1/2% acid.
- 5) Swab back acid, test well.
- 6) Fracture treat w/60,000 gals. gelled KCl water @ 40 BPM, 2000#, w/90,000# 20-40 sand, tailing in w/10,000 # 10-20 sand, shut well in overnight to let gel break up.
- 7) Flow back and recover load.
- 8) Flow back load and swab back load.
- 9) Return well to production.

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

SIGNED

TITLE

Agent

DATE

8-05-85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side