

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
Artesia, N.M. 88210

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

5. LEASE DESIGNATION AND SERIAL NO.  
NM-18626

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 ☐

2. NAME OF OPERATOR

Ralph E. Williamson

3. ADDRESS OF OPERATOR

PO Box 994; Midland, TX 79702

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

1980' FNL & 660' FWL

O. C. D.  
ARTESIA, OFFICE

14. PERMIT NO.

30-015-25297

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

3056' GL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Amoco Federal

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

East Ross Draw Delaware

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

Sec. 25, T-26S, R-30E

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 COMPLETION ☐

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.) \*

5-19-89 Shot interval 5645'-5659' w/9 holes of 0.40" diam. Holes shot were 5645, 46, 51, 53, 55, 58, 59. Acidized across perms @ 5645'-5669' w/1000 gals 7 1/2% NEFE. Formation broke @ 1000# after 1". Flushed w/2% KCl, started swabbing back load

5-20-89 &  
5-21-89 Swabbing back acid.

5-22-89 Fracture treated zone @ 5645'-5659' w/10,100 gals 30# X-link gel & 20,000# 20/40 sand & 5000# 12/20 sand. Fraced down 2 7/8" tbg. w/500# on annulus @ 1000# pressure.

5-23-89 &  
5-24-89 Swabbing back Frac fluid.

5-25-89 Bailed 70' sand. GIH w/MA (@ 5660'), 1 jt tbg, perf sub, SN (@ 5527'), 4 jts tbg, TA (@ 5429 w/14 pts wt.), & 165 jts tbg. GIH w/pump assembly & rods. Return to normal production.

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

SIGNED

*Maya Huber*

TITLE

Production

DATE

5-26-89

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

JUN 5 1989

\*See Instructions on Reverse Side

SJS  
CARLSBAD, NEW MEXICO