

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP DATE
(Other Instruction
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NMNM16814

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bedena 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

18, T26S, R30E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

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.)

RECEIVED

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Oryx Energy Company

3. ADDRESS OF OPERATOR

P.O. Box 26300, Oklahoma City, O.K. 73126-0300

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

Unit Ltr. D, 330' FNL & 330' FWL, Sec. 18, T26S, R30E

14. PERMIT NO.

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

3035.5 GR

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 COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Temp. Adandon wellbore

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 perti-
nent to this work.)

Procedure: casing integrity test to leave wellbore shut-in for 5 years:

11/7/91: MIRU WS Rig. PU & RIH w/ 2-3/8" WS to + 3300'. POOH standing w/ 2-3/8" tbg.

RIW w/ 5 1/2", 17# CIBP and set at 3300' from surface. Loaded wellbore w/ 2% KCL water

Pressured up on casing and plug to 540#. Started test @ 1:45 p.m.

0-min= 540#

5-min= 542#

10-min= 541#

15-min= 540#

20-min= 540#

25-min= 540#

30-min= 540#

Bled off pressure. Rlse of CIBP. POOH & LD 2-3/8" tbg. Rlse rig.

Test witnessed by NMOCD division Agent. Test chart was submitted by agent.

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

SIGNED

Jan Stevenson

TITLE Jan Stevenson

DATE Nov. 13, 1991

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

11/29/91

12 MONTH PERIOD

11/30/92

*See Instructions on Reverse Side