

BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back holes or to extend a well.
Use "APPLICATION FOR PERMIT" for such proposals.)

OIL WELL ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR

Fortson Oil Company

3. ADDRESS OF OPERATOR

301 Commerce Street, Suite 3301, Fort Worth Texas 76102

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, SW/4 NW/4, Unit Letter E

14. PERMIT NO.

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

3554' GR

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 ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETION ☐ABANDONMENT ☐CHANGE PLANT ☐

(Other) Completion Procedure

XX

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 (Include all pertinent details, and also pertinent dates, including estimated date of starting and proposed work. If well is fractionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

- Run TCPG and perforate 15,184 to 15,193' KB.
- Flow to clean-up and test.
- Perforate 15,276' to 15,281' KB through tubing.
- Acidize all perforations with 3600 gallons of 7.5% MS acid.
- Flow to clean-up and test.
- Run and set a check valve in "ER" receptacle on packer.
- Pull out of hole with tubing.
- Run packer, etc. and set with TCPG spaced to perforate 15,066' to 15,084' KB.
- Flow to clean-up and test.
- Install surface facilities for desired production level.
- Produce and/or test as required.
- Shut-in well for pressure build-up; run bomb to determine BHP and AOF test.

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

SIGNED

Sheyl D. Jones

TITLE

Agent

DATE

4/25/91

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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