

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☐ other ☒ Dry DEC 17 1993

2. NAME OF OPERATOR  
Merit Energy Company 214-701-8377

3. ADDRESS OF OPERATOR  
12222 Merit Drive, Suite 1500 Dallas, TX 75251

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 2090' FNL - 1980' FWL  
AT TOP PROD. INTERVAL: same  
AT TOTAL DEPTH: same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>

(other) complete as a water disposal well

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.)\*

Injection Formation: Bell Canyon (Delaware)  
Field: Sand Dunes W.

See attached completion procedure

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Sheryl J. Carruth TITLE Regulatory Manager DATE 12/7/93

(ORIG. SGD.) DAVID R. GLASS

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE PETROLEUM ENGINEER DATE DEC 14 1993

NM L CONS COMMS Approved.  
Drawer DD Budget Bureau No. 42-R1424

5. LEASE NM 29234

6. IF INDIAN, ALL INDIAN OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
SDS Federal

9. WELL NO.  
1

10. FIELD OR WILDCAT NAME  
Sand Dunes West Delaware

11. SEC., T., R., OR BLK. AND SURVEY OR AREA  
Sec 11, T24N, R31E

12. COUNTY OR PARISH  
Eddy

13. STATE  
New Mexico

14. API NO.  
30 015 27627

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3515' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

RECEIVED  
DEC 8 1 55 PM '93

COMPLETION PROCEDURE  
SUNDANCE FEDERAL #11  
SECTION 11, R31E, T24S  
EDDY COUNTY, NEW MEXICO

1. MIRU WSU. NU CLASS III BOP'S. POOH WITH KILL STRING.
2. RU WIRELINE. SET CIBP AT 8200'. TEST TO 1000 PSI. DUMP 20' CEMENT ON TOP OF PLUG. RIH WITH 4" CASING GUN AND PERFORATE 4968, 76, 82, 92, 99, 5042, 47, 65, 70, 74, 78, 90, 5107, 11, 24, 36, 44, 84, 88, 98 & 5207' @ 1 SPF. POOH WITH GUN. RD WIRELINE.
3. HYDROTEST TO 6000 PSI WHILE RIH WITH 2 7/8" BAKER MODEL R PACKER WITH 8 JOINTS OF TAILPIPE. SET THE PACKER AT 4960' AND TEST THE BACKSIDE TO 500 PSI.
4. RU ACID ENGR AND ACIDIZE AS FOLLOWS:  
  
ACID: 1500 GALS 15% SBA (ANTI SLUDGE).
  1. UNSET THE PACKER AND SPOT 6 BBLs ACID ACROSS THE PERFS. PUH AND SET THE PACKER AT 4670' AND TEST THE BACKSIDE TO 500 PSI.
  2. BREAKDOWN THE BELL CANYON WITH THE ACID AND 35 BALL SEALERS (SPACED EVENLY THROUGHOUT JOB). RECORD ISIP, 5 MIN, 10 MIN & 15 MIN SI PRESSURES.
5. UNSET PACKER AND POOH.
6. RU BJ TO FRAC AND PROTECHNICS. FRAC DOWN THE CASING PER THE FRAC RECOMMENDATION WITH 71,500 GALS GELLED WTR AND 252,500# OF 12/20 BRADY SAND. TAG THE 12/20 BRADY W/IR-192. FLOW THE WELL BACK IMMEDIATELY TO FORCE CLOSE THE FORMATION. SD. RD BJ & PROTECHNICS.
7. RIH WITH MULESHOE AND CLEANOUT THE WELL TO PBTD. CIRCULATE CLEAN. POOH WITH TUBING.
8. RU WIRELINE AND RUN AFTER FRAC SURVEY. FORWARD RESULTS TO DALLAS OFFICE. RD WIRELINE.
9. RIH WITH BAKER LOK-SET PACKER WITH ON-OFF TOOL ON 2 7/8", 6.5# TUBING. SET THE PACKER AT 4900'. TEST BACKSIDE TO 500#. J OFF ON-OFF TOOL AND CIRCULATE INHIBITED FLUID. J ONTO ON-OFF TOOL. TEST BACKSIDE TO 500#.
10. RD WSU. ND BOP'S. COMMENCE INJECTION.