

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Designation and Serial No. SF 079296
2. Name of Operator CONOCO INC.		6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 10 DESTA DR. STE. 100W, MIDLAND, TX. 79705-4500 (915) 686-5424		7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T. R. M. or Survey Description) Section 23, T-26-N, R-6-W, I 1500' FSL & 790' FEL		8. Well Name and No. Buttram #4
		9. API Well No. 30-039-06377
		10. Field and Pool or Exploratory Area Basin Fruitland Coal
		11. County or Parish, State Rio Arriba, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Repon	<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracuring
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water

(Note: Report result of multiple completion w/d Completion or Recompletion Report and Log form.)

13. 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.)*

It is proposed to recomplete this well to the Fruitland Coal using the attached procedure.

RECEIVED
AUG 25 1998

OIL CON. DIV.
DIST. 3

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

14. I hereby certify that the foregoing is true and correct		Signed <u>Kay Maddox</u> Title <u>Regulatory Agent</u> Date <u>8/11/98</u>	
(This space for Federal or State office use)		Approved by <u>/s/ Duane W. Spencer</u> Title <u></u> Date <u>AUG 21 1998</u>	
Conditions of approval if any			

BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FILE ROOM

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

*See Instruction on Reverse Side

Recommended Procedure and Notes

Notes:

1. All depths in this procedure are referenced from KB unless noted otherwise.
2. Please give service companies 24 hours advance notice prior to performing work on the well.
3. Wellhead is assumed to be a 2000 psig wellhead. Check configuration prior to beginning work.

Safety Precautions:

1. Smoking will not be allowed within 100' of the wellhead.
2. All on-site personnel are to wear safety glasses with side-shields, steel-toed boots, and plastic hardhats at all times.
3. Eye protection and hand protection should be worn when handling acid/chemicals. Eye protection should be worn when there is the potential for acid/chemicals to blow or splash into the eyes.
4. MSDS's for all chemicals used in this procedure must be available on location for inspection and use. An inventory of all chemicals used should be submitted to SHEAR in the Midland office at the completion of the job.
5. The service company should bring communication devices for each individual operating pumps/valves and for the field engineer.
6. Fresh water will be on location in case of accidental discharge or an emergency (water to be provided by the treating company).
7. Eye wash bottles should be available and ready for use. All on-site personnel should be aware of the location of these bottles.
8. Only personnel needed for the job will be allowed on location.
9. Acidizing company should furnish fresh water rinse station for use in case of emergency.
10. All lines that will be transporting energized fluids will be securely staked or chained. (See Conoco/BJ Services Treating Lines Safety Standards.)
11. Hold tailgate safety meetings daily prior to any work being performed. Determine safe location where all personnel will meet in the event of an emergency.

Procedure:

1. Prepare location for work. Test deadmen anchors.
2. MIRU workover rig. Kill well w/1% KCl water (use minimal amount of water but ensure well is

Recomplete and Fracture Stimulate FC
Buttram #4

dead.

3. ND wellhead and NU BOP.
4. POOH w/2 $\frac{3}{8}$ " 4.7# tubing and lay down on slip.
5. RIH w/bit and casing scraper suitable for 7" 20# casing to $\pm 2710'$. POOH w/bit and scraper.
6. MIRU wireline company. RIH w/CIBP suitable for 7" 20# casing and set at $\pm 2705'$.
7. Load hole w/1% KCl water and pressure test to 500 psig (hold for CBL logging run).
8. RIH w/CBL log and log from $\pm 2705'$ to TOC (include 3 jts of free pipe at top of log).
9. RIH with GR/GSL logging tools (use coal flags on log output) and log from $\pm 2705'$ to $\pm 1705'$.
10. RIH w/4" HSC perforating guns loaded w/22 gram charges, 4 spf. and 90° phasing. Perforate the Fruitland Coal zone from 2519' - 2705' OA. POOH w/guns.

Note: Actual perforated interval will not be picked until after reviewing the GR/GSL log.
11. RIH w/3 $\frac{1}{2}$ " frac string and treating packer suitable for 7" 20# casing to $\pm 2400'$ (actual setting depth to be $\pm 100'$ above top shot).
12. Fracture stimulate the Fruitland Coal as per B J Services recommendations.
13. Release treating packer and POOH w/frac string. PU 2 $\frac{7}{8}$ " 6.5# tubing and 6 $\frac{1}{4}$ " bit. Drill up CIBP @ $\pm 2705'$ and Clean out hole to TD ($\pm 2800'$). POOH w/tubing and bit.
14. RIH w/tubing and land tubing in cased hole section just above the PC zone ($\pm 2700'$).
15. Swab or jet well to clean up as necessary. Put well on production and monitor flowrates and pressures. Flow well long enough to ensure well is cleaned up and not making sand.
16. Report results to Midland office.

Hazardous Chemical Inventory:

Hazardous chemical reporting is required under SARA Title III. A Blank form "WORKOVER/COMPLETION INVENTORY (HAZARDOUS CHEMICAL INVENTORY)" is attached to this procedure. The form should be filled out by the service company representative delivering chemicals to the location. Also, MSDS's and amount of chemical is to be provided. The Conoco representative on location is to forward the completed form and MSDS's to the Coordinator-Environmental Affairs in the Midland Division Office.

Prepared by: D. B. Jackson
Staff Engineer
July 15, 1998

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brazos Rd. Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

PO Box 2088
Santa Fe, NM 87504-2088

*Hold 8-184
for NSL*
Form C-102

Revised February 21, 1994

Instructions on back

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

070 FARMINGTON, NM ☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-039-06377		2 Pool Code 71629	3 Pool Name Basin Fruitland Coal	
4 Property Code 003145	5 Property Name Buttram			6 Well Number #4
7 OGRID No. 005073	8 Operator Name Conoco Inc., 10 Desta Drive, Ste. 100W, Midland, TX 79705-4500			9 Elevation 6372'

10 Surface Location

UL or lat/lon	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	23	26N	6W		1500'	South	790'	East	Rio Arriba

11 Bottom Hole Location If Different From Surface

UL or lat/lon	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
12 Dedicated Acres 320		13 Joint or Infill		14 Consolidation Code		15 Order No.			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16				

1500'

790'

17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Kay Maddox
Signature

Kay Maddox
Printed Name

Regulatory Agent
Title

July 29, 1998
Date

18 SURVEYOR CERTIFICATION

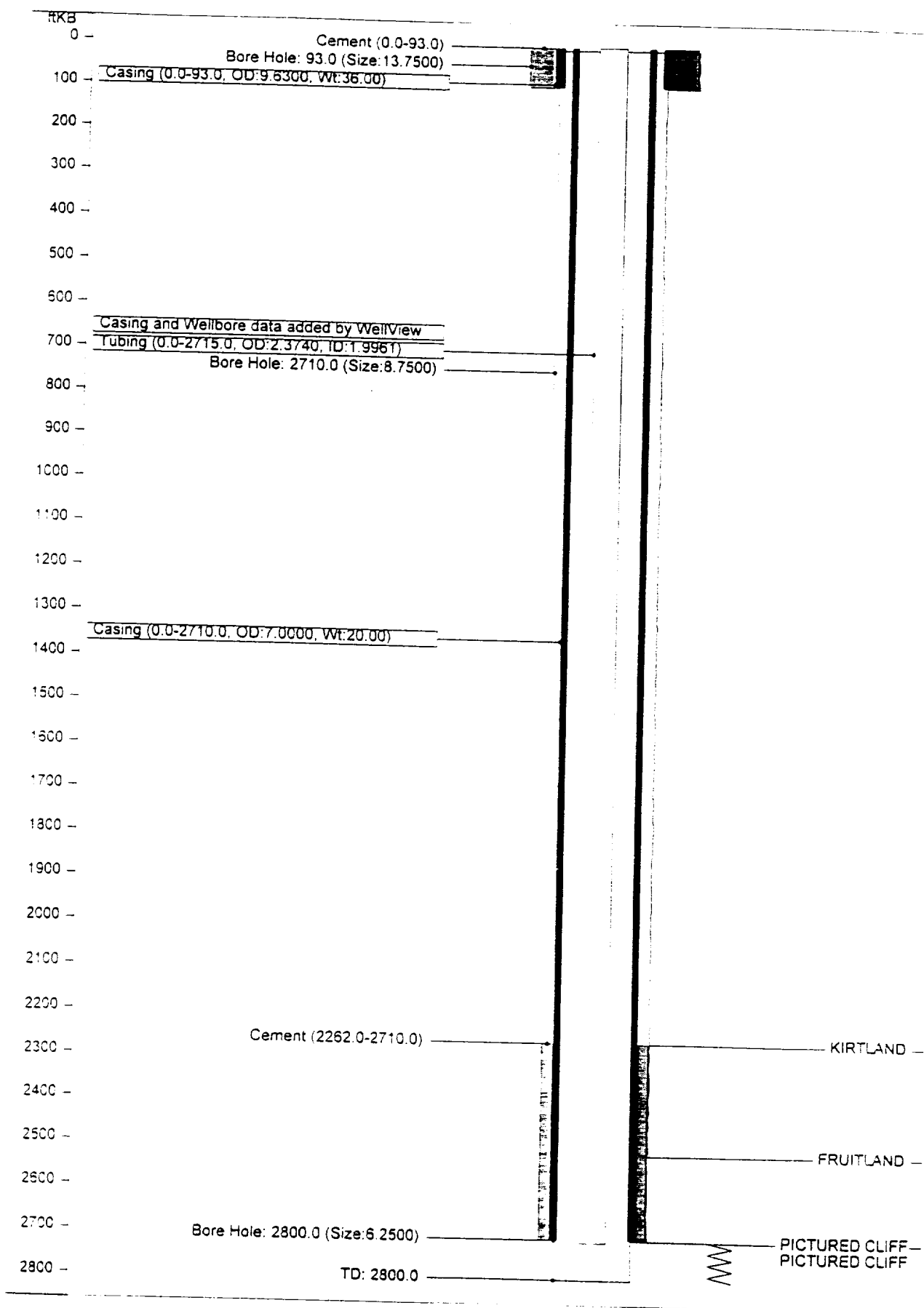
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey

Signature and Seal of Professional Surveyor:

Certificate Number

BUTTRAM 4 (DBJ - 7/15/98)



CONDITIONS OF APPROVAL

Conoco Inc
No. 4 Buttram
1500' FSL & 790' FEL
Sec 23-26N-06W
Lease No. SF-079296

- 1) Notify the Farmington Field Office Inspection and Enforcement Division @ (505) 599-8907 within 24 hours prior to commencing recompletion operations.
- 2) File one original and three copies of Subsequent Report of Operations (form 3160-5) and Well Completion Report (form 3160-4) within 30 days of completion operations which provides a detailed description of all operations conducted.
- 3) Once completed for production in the Fruitland Formation, a committization agreement will be required for the E½ of section 23.
- 4) Prior to commencing recompletion operations, BOPE must be installed and tested in accordance with the requirements outlined in Onshore Order #2. A minimum of a 2M system will be required for this recompletion attempt.