

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPE
(Other instructions
verse side)

Form approved.
Budget Bureau No. 42-R1421

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.)

7. LEASE DESIGNATION AND SERIAL NO.

NY 027068

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

9. UNIT AGREEMENT NAME

10. FARM OR LEASE NAME

Rundy Federal

11. WELL NO.

1

12. FIELD AND POOL, OR WILDCAT

Chaveroo (S. A.)

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

Sec. 10, T9S, R33E

14. COUNTY OR PARISH 15. STATE

Chaves

New Mexico

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Dumble Oil & Refining Company

3. ADDRESS OF OPERATOR
P. O. Box 1800, Midland, Texas

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

685' FWL - 1,986' FNL

14. PERMIT NO.

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

4,414 DF

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) Perforate and test

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.)*

WOC 18 hours after squeeze job. Perforate w/1 shot @ 4252, 4274, 4278, 4295, 4298, 4300. Log perforations. Spot 18 bbl. regular NE acid across perforations. Acidize w/3000 gal regular NE acid w/8 balls. Formation broke @ 2100 psi. Max treating pressure 3400 psi. Avg. injection rate 4.5 BPM. I. S. I. P. 900 psi, 10 min SIP 800 psi. Swab test well. Recovered 9 1/2 BO, 11 1/2 BW in 9 hours. Retreat above perforations w/6500 gal NE acid w/25 gal Marflo 11; 33 gal 8C-11 acid; 1500 std CF-CO₂ and 8 - 2 7/8" RCN balls. Max pressure 5800 psi, Min pressure 800 psi. AIR - 4.4 BPM, I. S. I. P. - 1300 psi, 10 min S. I. P. 1225 psi. Prepare to test.

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

SIGNED D. L. Clemmer TITLE Agent

DATE 11-3-68

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____