

NM OIL CONS. COMMISSION
UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
Artesia, NM 88210
SUBMIT "APPLICATION" (Other instructions on reverse side)

Form approved.
BUDGET BUREAU No. 42-R1424

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|--|--|---|
| 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.) | | 5. LEASE DESIGNATION AND SERIAL NO. NM-7814 |
| . OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Salt Water Disposal Well <input checked="" type="checkbox"/> | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME SLUP-23 |
| . NAME OF OPERATOR Read & Stevens, Inc. | | 7. UNIT AGREEMENT NAME |
| . ADDRESS OF OPERATOR P.O. Box 1518, Roswell, NM 88201 | | 8. FARM OR LEASE NAME Federal "L" |
| . LOCATION OF WELL (Report location clearly and in accordance with requirements.* See also space 17 below.) At surface 1980' FEL & 660' FNL Sec. 21, T-6-S, R-27-E, N.M.P.M. | | 9. WELL NO. 1 |
| . PERMIT NO. - | | 10. FIELD AND POOL, OR WILDCAT Haystack 4213-13-13-13 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4073' GR, 4084' RKB | | 11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21-6S-27E, N.M.P.M. |
| | | 12. COUNTY OR PARISH Chaves |
| | | 13. STATE New Mexico |

Check Appropriate Box To Indicate Nature of Notice, Report, Other Data

NOTICE OF INTENTION TO:

| | | | |
|---------------------|--------------------------|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | PULL OR ALTER CASING | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | MULTIPLE COMPLETE | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | ABANDON* | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | CHANGE PLANS | <input type="checkbox"/> |
| (Other) | <input type="checkbox"/> | | <input type="checkbox"/> |

SUBSEQUENT REPORT OF:

| | | | |
|-----------------------|-------------------------------------|-----------------|--------------------------|
| WATER SHUT-OFF | <input type="checkbox"/> | REPAIRING WELL | <input type="checkbox"/> |
| FRACTURE TREATMENT | <input type="checkbox"/> | ALTERING CASING | <input type="checkbox"/> |
| SHOOTING OR ACIDIZING | <input checked="" type="checkbox"/> | ABANDONMENT* | <input type="checkbox"/> |
| (Other) | <input type="checkbox"/> | | <input type="checkbox"/> |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

3-4-83 Re-Acidized 6325'-6345' w/1000gals 20% F.E. Acid, 1.4 BPM @ 200psi, flush w/1000gal FW, 30 BFW @ 100psi, ISIP-vacuum.

RECEIVED

MAR 9 1983

OIL & GAS
MINERALS LICHT. SERVICE
ROSWELL, NEW MEXICO

hereby certify that the foregoing is true and correct

SIGNED B. Stobley TITLE Drilling & Production Manager DATE 3-9-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

RSP
JUL 1 1983

ROSWELL, NEW MEXICO