

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL  
(Other instructions on re-  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 53957-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

O'Connell Fed. Com.

8. FARM OR LEASE NAME

O'Connell Fed. Com.

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Pecos Slope, Abo,

Wildcat, Montoya

11. SEC., T., R., OR BLK. AND SURVEY OR AREA

Sec. 15, T-6S, R-26E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

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.)

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Stevens Operating Corporation

3. ADDRESS OF OPERATOR

P. O. Box 2408, Roswell, New Mexico 88202

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

14. PERMIT NO.

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

3668.1' GR

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 PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Production Casing

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

X

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.)

December 5, 1989

TD 5595' KB, 2:30 p.m.

December 6, 1989

Ran 5595' 5 1/2" csg, cement w/680 sx's of 65/35 premium plus poz, 5# salt, 4/10% Halad, 3/10% CFR-3. Plug down @ 5:00 a.m. WOC 18 hrs. Pressure up 1000# for 30 min. logging no pressure decrease.

December 7, 1989

Temp. survey shows top cement, 3200'.

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

SIGNED

TITLE General Manager

DATE 12/11/89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side