

Form 1160-5
November 1983
Bureau of Land Management

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 80210

SUBMIT INSTRUCTIONS ON REVERSE SIDE

Form approved.
Budget Bureau No. 1004-0125
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-0415688-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

OLD INDIAN DRAW UNIT

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

INDIAN DRAW DELAWARE

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

18-22-28

12. COUNTY OR PARISH 13. STATE

Edley

NM

1. OIL WELL ☐ GAS WELL ☐ OTHER WATER INJECTION WELL
2. NAME OF OPERATOR OCT-2'89
Amoco Production Company
3. ADDRESS OF OPERATOR O. C. D.
P.O. Box 3092 Houston TX 77253 ARTESIA, OFFICE
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
(See also space 17 below.)
At surface
2002' FSL x 1721' FWL SEC. 18
UNIT K, NE1/4, SW1/4

14. PERMIT NO. 15. ELEVATIONS (Show whether OF, RT, GR, etc.)

3001521619

3088.3' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☐

CHANGE PLANS

☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☒

ABANDONMENT*

☐

(Other)

(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.)

MI AND RU Coil Tubing Unit. JET WELLBORE w/ NITRIFIED 2% KCL WATER. WASH PERFS W/ COIL TBG AND WASH TOOL USING 1000 GALS 15% NEFE HCL. ACID PERFS W/ 2000 GALS 15% NEFE HCL AND 5% A-SOL G-15 AND CLAY CONTROL. JET BACK LOAD AND PULL COIL TBG. RETURN WELL TO INJECTION. PERFS: 3192' to 3256' 7-19-89

BWD: 119 BWIPD 612 PSI

AWD: 387 BWIPD 516 PSI

SEP 21 11 45 AM '89
CARBONATE ROCK RESERVE
AREA REVENUE OFFICE

RECEIVED

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

SIGNED Blake T. Steele

TITLE Admin. Analyst

DATE 9-18-89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side