| (| | |
|--|--|---|
| NO. OF COPIES RECEIVE | | · |
| DISTRIBUTION | 自由的专家的,专为的表现。 | Form C-103 Supersedes Old |
| SANTA FE | NEW MEXICO OIL CONSERVATION COMMISSION | C-102 and C-103 |
| FILE | | Effective 1-1-65 |
| U.S.G.S. | FEB 27 23 IN 'EB | 5a. Indicate Type of Lease |
| LAND OFFICE | | State X Fee |
| OPERATOR | | 5. State Oil & Gas Lease No. |
| | | K 5702 |
| (DO NOT USE THE | SUNDRY NOTICES AND REPORTS ON WELLS IS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) | |
| WELL 21 | GAS OTHER- | 7. Unit Agreement Name |
| 2. Name of Operator | | 8. Farm or Lease Name |
| L | bel & Forster | Midwest - State |
| 3. Address of Operator | | 9. Well No. |
| 1126 Vaugh: | n Building, Midland, Texas | 1 10. Field and Pool, or Wildcat_ |
| UNIT LETTER P | 660 South 510 | MiddleLane Permo Penn |
| D | 10 10 C 22 F | |
| THE LAST | LINE, SECTION 16 TOWNSHIP 10-S RANGE 33-E NMPM. | |
| mmmm | 15. Elevation (Show whether DF, RT, GR, etc.) | 12. County |
| İllililili | 4194' GL | Lea |
| PERFORM REMEDIAL WORD TEMPORARILY ABANDON PULL OR ALTER CASING | | REPORT OF: ALTERING CASING PLUG AND ABANDONMENT |
| OTHER | | |
| 17 Describe Proposed o | or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including | |
| work) SEE RULE 11 | 103. | estimated date of starting any proposed |
| 12/9/67: (12/11/67: \text{ } | Orilled 7 7/8" hole to 9638'. Cemented 5 1/2" casing @ 9638' w/400 sx. Plug down @ WOC. Tested casing w/2000 psi. OK. Perforated the 5 @ 9443'; @ 9440'; & @ 9437'. Acidized w/1000 gal 15% a | 1/2" OD casing w/2 JS |
| 12/19/67: | Swabbed well w/good show of gas. Acidized w/3000 gal HCL. | 28% HCL & 1500 gal 3% |
| | Pump 18 BO w/43% water in 24 hours. | |
| , , | Acidized w/6000 gal 28% HCL & 6000 gal 3% acid. | • |
| | Pump 11 BO w/trace of water in 24 hours. | |
| , , | Acidized w/30,000 gal 20% acid & 20,000 gal 3% acid. | |
| | | |
| 2/22/68: | Pumping & testing well. | |
| | | |
| | | |
| | | |
| • | | |
| | | |

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

SIGNED

SUPERVISOR DISTRICT:

DATE

2/22/68

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY I