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FILE
U.S.G.S.
LAND OFFICE
OPERATOR

NEW MEXICO OIL CONSERVATION COMMISSION

1-28-70
Supervisory Oil
6-102 and 6-103
Executive Order

State of New Mexico
County of <u>70</u>
Section of <u>70</u>

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR A MESSAGE TO DRILL OR TO RE-OPEN OR RE-TEST A PRE-EXISTING RESERVOIR.
USE APPLICATION FOR PERMIT (FORM 1-101) FOR SUCH PURPOSES.

1. NAME OF WELL	2. NAME OF OPERATOR	3. ADDRESS OF OPERATOR	4. LOCATION OF WELL	5. ELEVATION (Show whether HP, RT, GR, etc.)	6. OTHER DATA
OIL WELL ☒ GAS WELL ☐ OTHER ☐	Amini Oil Corporation	400 Wall Towers West - Midland, Texas 79701	UNIT <u>N</u> <u>1374</u> FEET FROM THE <u>West</u> LINE AND <u>766</u> FEET FROM <u>South</u> LINE SECTION <u>33</u> TOWN <u>11-S</u> RANGE <u>33-E</u> NADIA	4235 GR	7. Other Appropriate Data
					Mathers
					2
					North Bagley
					Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☒	
		OTHER <u>Perf & Acidize</u>	

17. Description and Date of Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- 12-29-69 Drilled 7-7/8" Hole to 10,150'
- 12-30-69 Cemented 5-1/2" OD 17# & 20# J-55 & N-80 casing @ 10,150' w/600 sx. cement. Plug down @ 9:00 P.M. W.O.C.
- 12-31-69 W.O.C. total 24 hours. Spotted 1000 gal. 15% N.E. acid on bottom. Tested casing w/2000 psi. Ok. Perforated from 9903 to 9983 w/16 holes. Well on vacuum.
- 1-19-70 Reacidized above perforations with 10,000 gallons retracted acid.

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

SIGNED <u>W. D. B. Smith</u>	TITLE <u>Agent</u>	DATE <u>1-28-70</u>
APPROVED BY <u>[Signature]</u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		