

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

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

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 55001
2. NAME OF OPERATOR SPENCE ENERGY COMPANY 381 Two Energy Square		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -
3. ADDRESS OF OPERATOR 4849 Greenville Ave. Dallas, Texas 75206		7. UNIT AGREEMENT NAME -
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980'FSL, 1980'FEL, Sec.25-9S-32E		8. FARM OR LEASE NAME Federal "25"
14. PERMIT NO. -		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4303' GL		10. FIELD AND POOL, OR WILDCAT Undesignated-Morrow
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec.25-9S-32E
		12. COUNTY OR PARISH Lea
		13. STATE N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Perforating & Completing</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)*

- 7-09-85: Perfed 10,776' to 10,782' (2 holes/ft) - Lower Morrow
Ran tubing, w/pkr, set at 10,700'.
Spotted 250 Gal. 7.5% HCL, Press. broke at 3000#
Pulled tubing and packer.
- 7-17-85: Perfed 10,532' to 10,538' (2 holes/ft) - Upper Morrow
Ran 2-7/8" tubing with production packer to 10,482'.
Well unloaded in 30 Min. on 1/4" choke. FTP 2100#.
- 7-22-85: 72 Hr. SITP 2175 psi.
Ran 4-Pt. test - CAOF 9013 MCF + 3 Bbl. Condensate in 4 Hrs.
Shut In - Waiting on pipeline connection

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

SIGNED

Jerry W. Long
JERRY W. LONG

TITLE Agent

DATE August 20, 1985

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

AWD
AUG 23 1985

*See Instructions on Reverse Side

CARISBAD, N.E. MEXICO