

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240DISTRICT II
P.O. Drawer DD, Artesia, NM 88210DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. K-1369
7. Lease Name or Unit Agreement Name Haley Chaveroo San Andres Unit Sec. 33
8. Well No. 12
9. Pool name or Wildcat Chaveroo San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection Well	2. Name of Operator Murphy Operating Corporation
3. Address of Operator P. O. Drawer 2648, Roswell, New Mexico 88202-2648	4. Well Location Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line Section 33 Township 7 South Range 33 East NMPM Roosevelt County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Acidize ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

11-19-90 Acidize well with 2000 gals 15% Ne Pentol acid with 500# salt block.
Good Block action.Avg. rate 1.5 BPM
Max rate 2.0 BPMAvg. pressure 850 psig
Max pressure 1000 psigISIP 720 psig 5" SIB 680 psig. Displace with fresh water. Return to
injection.

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

SIGNATURE

Lori Brown

TITLE

Production Supervisor

DATE 3-1-91

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

Orig. signed by
Paul Kautz
Geologist

APPROVED BY

TITLE

DATE MAR 07 1991

CONDITIONS OF APPROVAL, IF ANY: