**PULL OR ALTER CASING** 

11.

OTHER:

## State of New Mexico

Form C-103

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

o Appropriate District Office	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240			WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE  FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	e e e		6. State Oil & Gas Lease No. K-1369
( DO NOT USE THIS FORM FOR PRODIFFERENT RESE	ICES AND REPORTS ON WELL OPOSALS TO DRILL OR TO DEEPEN OR RVOIR. USE "APPLICATION FOR PER 101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name Haley Chaveroo San Andres Unit
. Type of Well: OIL GAS WELL X WELL	OTHER		Section 34
Name of Operator  MURPHY OPERATING  Address of Operator  P. O. Drawer 264	CORPORATION  8. Roswell, New Mexico 8	38202-2648	8. Well No.  10 9. Pool same or Wildcat Chayeroo San Andres
Mell Location	980 Feet From The <u>Fast</u>		
NOTICE OF IN	Township 7 South Ram  10. Elevation (Show whether L  4397	Vature of Notice, F SUE REMEDIAL WORK COMMENCE DRILLIN CASING TEST AND C	BSEQUENT REPORT OF:  ALTERING CASING  GOPNS.  PLUG AND ABANDONMENT
OTHER:	·	OTHER: Convert	to injection well $(k-8760)$ X
12. Describe Proposed or Completed Oper work) SEE RULE 1103.	nicos (Clearly state all portinent details, en	d give pertinent dates, incl	uding estimated date of starting any proposed
to [ 4-26-1989 c	TOH and lay down rods, pump, and tubing. Pick up and TIH w/ 4 1/2" D.C. Oil Tool AD-1 plastic coated packer and 130 jts (4030') ceramic coated 2 3/8" tubing. Set packer at 4043' K.B. and pump 50 bbls packer fluid. Pressure test annulus (see attached charts) to 320 psig for 35 minutes. Held O.K		
Ç	Acidize well w/ 1000 gal 9.7 BPM. Average pressu vacuum. Initiate inject	re 2600 psig.	verage rate 8.2 BPM. Maximum ra Maximum pressure 3850 psig. ISI

I hereby certify that the information above is true and complete to the best of my knowledge and belief. 7-6-1989 Production Supervisor SIGNATURE TELEPHONE (0505) 623-7210 Donna Bauer TYPE OR PRINT NAME

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY-

