

DEPARTMENT OF THE INTERIOR (Reverse side)  
BUREAU OF LAND MANAGEMENT  
MINT. OIL CONS. COMMISSION

3. LEASE DESIGNATION AND SERIAL NO.  
NM- 0139989

SUNDRY NOTICES AND REPORTS ON WELLS  
ROOSEVELT, NEW MEXICO, 88240

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME  
Todd Lower San Andres Unit, Sec. 30

8. FARM OR LEASE NAME

9. WELL NO.  
6

10. FIELD AND POOL, OR WILDCAT  
Todd Lower San Andres Assoc

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 30, T7S, R36E

12. COUNTY OR PARISH

Roosevelt NM

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
Plains Petroleum Operating Co.

3a. Area Code & Phone No.  
(915) 683-4434

3. ADDRESS OF OPERATOR  
415 West Wall Street, Suite 2110 Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

Unit Letter F, 1873.3' FWL & 1980' FNL

14. PERMIT NO.

15. ELEVATIONS (Show whether SP, RT, GL, etc.)  
GL 4151'

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
(Other) Convert to WIW

PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
ABANDON ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☐  
(Other) ☐  
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL ☐  
ALTERING CASING ☐  
ABANDONMENT ☐

17. DESCRIBE PROMISED 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.)

Pursuant to approval from BLM, Plains plans to convert this well to injection status for the waterflood development program at the Todd Lower San Andres Unit.

Procedure - Rig up pulling unit, pick up injection tubing and packer, set packer within 100 feet of uppermost P2 zone perforations, load annulus with inert packer fluid and pressure test to 300 psi and hold for 30 mins.



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

SIGNED Bonnie Husband TITLE Engineering Tech

DATE June 8, 1990

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

SUBJECT TO LIKE  
APPROVAL BY STATE

DATE JUN 30 1990

\*See Instructions on Reverse Side