

N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240
UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-15895	
2. NAME OF OPERATOR Robert N. Enfield		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 2431 Santa Fe, New Mexico 87501		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 & 990' FWL of Sec. 3		8. FARM OR LEASE NAME Carson Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4277.5 GR		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLEK. AND SURVEY OR AREA Sec. 3, T-9-S, R-31-E	
		12. COUNTY OR PARISH Chaves	
		13. STATE New Mexico	

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 type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>DST No. 3</u> <input checked="" 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.)*

DST No. 3 from 10,250' to 10,267', (17') Devonian

Initial flow period: (tool open 30 minutes). Open with weak blow, increase to good blow, 14" in bucket.

Initial shut-in period: (tool shut in 90 minutes).

Final flow period: (tool open 60 minutes). Open with weak blow, increased to good blow, 15 inches in bucket.

Final shut-in period: (Tool shut in 180 minutes).

Drill pipe recovery: Recovered 280' drilling mud, 3023' formation water.

Sampler recovery: 15 psig. Recovered 2200 cc formation water.

Bottom hole temperature: 180°.

Pressure summary:

Initial Hydrostatic: 5126 psig

Initial flow pressure: 44 - 576 psig (30 minutes)

Initial shut-in pressure: 3872 psig (90 minutes)

Final flow pressure: 665 - 1420 psig (60 minutes)

Final shut-in pressure: 3872 psig (180 minutes)

Final hydrostatic pressure: 5126 psig.

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

SIGNED

Sheryl L. Cook

TITLE

Agent

DATE

10/16/85

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER W. CHESTER

OCT 23 1985

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side

RECEIVED

OCT 24 1985

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