

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

PERMIT IN TITLE
Other instructions on the
reverse side

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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 ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Amerada Hess Corporation	8. FARM OR LEASE NAME Federal "A"
3. ADDRESS OF OPERATOR Drawer D, Monument, New Mexico 88265	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL & 1274.18' FEL Unit B	10. FIELD AND POOL, OR WILDCAT Bronco Sil-Dev.
14. PERMIT NO.	11. SEC., T., R., W., OR BLK. AND SURVEY OF AREA Sec. 14, T13S, R38E
15. ELEVATIONS (Show whether OP, RT, GR, etc.) 3810' DF	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	☐	WATER SHUT-OFF	☐
FRAC. RE. TREAT	☐	FRAC. RE. TREATMENT	☐
ABANDON OR ACIDIZE	☒	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	☐	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	☐
Cement Squeeze	☒		

17. DESCRIBE DEPENDS OF 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.)

Plan to MIRU pulling unit & TOH w/pump & rods. Install BOP & TOH w/tbg. TIH w/pkr., set at 11,700'. Press. test backside to 500#. If press. holds, swab test Devonian Zone 5-1/2" csg. perfs. fr. 11,728' - 11,800'. Acidize perfs. w/1000 gal. 15% HCL acid. Swab test & place well back on production. If press. does not hold, TIH w/BP set at 11,680' & retainer set at 11,320'. RU cementers, test tbg., establish rate & pump cement to squeeze broken down perfs. Drill out cement & press. test csg. to 500#. Swab test & acidize Devonian Zone 5-1/2" csg. perfs. fr. 11,728' - 11,800' w/1000 gal. 15% HCL acid if necessary. Re-run prod. eqpt. & place well back on production.

18. I hereby certify that the foregoing is true and correct		
SIGNED <i>R. L. Wheeler</i>	TITLE <i>Supv. Adm. Svc.</i>	DATE <i>9-26-89</i>
(This space for Federal or State office use)		
APPROVED BY <i>Adam Salas</i>	TITLE	DATE <i>9/29/89</i>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

RECEIVED

OCT 2 1983

OCD
MOBBS OFFICE