

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

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

WELL API NO.

30-041020414

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Peterson Penn Storage System

8. Well No.

1

9. Pool name or Wildcat

Peterson Penn

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 ☐

GAS
WELL ☐

OTHER SWD

2. Name of Operator

Bridge Oil Company, L. P.

3. Address of Operator

12377 Merit Drive, Ste. 1600, Dallas, TX 75251

4. Well Location

Unit Letter M : 330 Feet From The South Line and 990 Feet From The West Line

Section 18

Township 5

Range 33

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: Re-work well for Injection ☒

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.

April 3, 1990 - Moved in Workover Rig and drilled out casing shoe from 8470'-8656'. Acidized in three stages w/3200 Gal. 15% NEFE gelled acid. Water disposal rate after acid stimulation, 600 BWPD at approximately 50 psi. Ran 2-7/8" injection tubing and set packer at 7618'. Pressure tested casing annulus to 500 psi. O. K.

did not add any new perfs - Confirmed by Dora McLaugh 5-1-90

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

SIGNATURE

Dora McLaugh

TITLE

Regulatory Analyst

DATE

4/24/90

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY

DISTRICT I SUPERVISOR

TITLE

DATE

MAY 1 1990

CONDITIONS OF APPROVAL, IF ANY:

