

N. M. STATE DEPARTMENT OF LAND MANAGEMENT
P. O. BOX 1890
HOBBS, NEW MEXICO 88240

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
JAN 27 11 36 AM '92

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

FORM APPROVED

Budget Bureau No. 1004-0135
Expires: September 30, 1990

5. Lease Designation and Serial No.

NM-37611

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Scott Federal #2 SWD

9. API Well No.

30-041-20637

10. Field and Pool, or Exploratory Area

North Paterson

11. County or Parish, State

Roosevelt

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other Salt Water Disposal

2. Name of Operator

EP Operating Company

3. Address and Telephone No.

6 Desta Drive, Suite 5250, Midland, TX 79705-5510

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FNL & 1980' FEL, Section 20, T4S, R33E

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection

Replace Bad Tubing

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Pulled out of hole with tubing and packer. Ran back in hole with tubing and packer testing to 5000# above the slips. Found hole in the 194th joint down and blew hole in top joint. Replaced both joints. Landed packer in 16 points compression. Pressure tested packer and casing to 500# for 30 mins, held good. Returned well to normal operations. Work was begun on 1/20/92 and concluded on 1/21/92.

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

Signed A. S. Lee Title Production Superintendent Date 1/23/92

(This space for Federal or State office use)

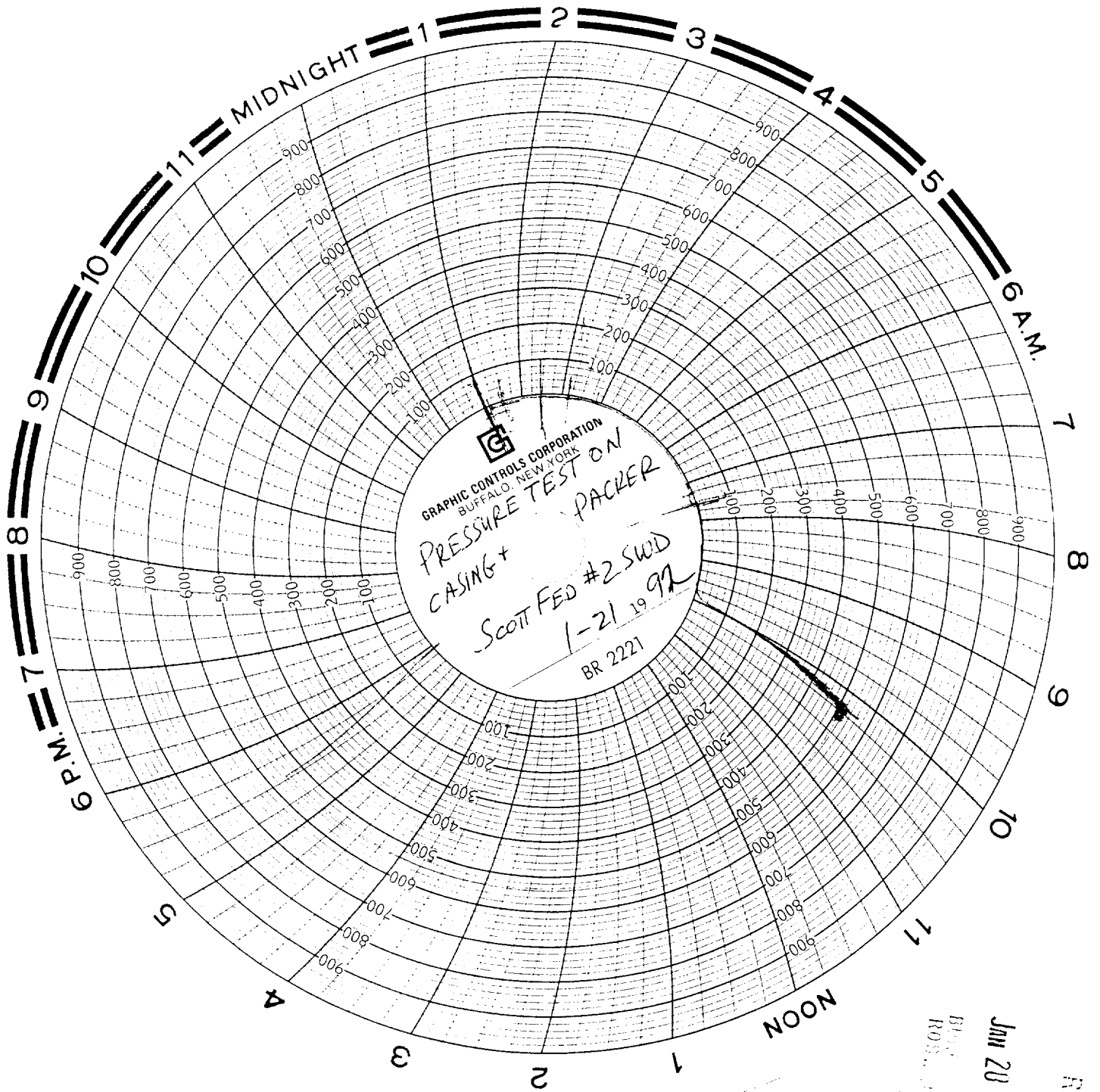
Approved by _____ Title _____
Conditions of approval, if any: _____

RECEIVED
JAN 27 6 34 AM '92
ACCEPTED FOR RECORD
PETER A. CHAMBERLAIN
Date _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

BUREAU OF LAND MANAGEMENT
ROOSEVELT COUNTY, NEW MEXICO



RECEIVED
JUN 20 6 34 AM '92
R.D. ...
...