

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.

30-025-03780

Indicate Type of Lease

STATE

FEE ☒

State Oil & Gas Lease No.

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.)

Lease Name or Unit Agreement Name

Lovington Paddock Unit

Type of Well:

OIL

GAS

WELL

WELL

OTHER water injection

Well No.

14

Pool name or Wildcat

Lovington Paddock

Well Location

Unit Letter B 990 Feet From The north Line and 1741 Feet From The east Line

Section 36 Township 16S Range 36E NMPM Lea County

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: ☐

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.

3/17/00 - Pulled, examined tbq. TIH w/ bit & tbq; drld 6010' - 6067'; circ wellbore clean; drld 6067' - 6077', fell thru. Washed bit down 6077' - 6230', tagged; drld to 6297' (TD), circulated wellbore clean.

3/18/00 - Pulled work string, TIH w/ packer & tbq (open-ended @ 5987' w/ pkr swinging free @ 5741'. SITP 325#; bled off pressure. Set pkr @ 5987'. Pressured csg to 500#, pmpd 10 bbl FW pad, established inj. rate of 2.0 BPM @ 1780#. Acidized open hole 6079'-6300' w/ 2500 gal 15% NEFE inhibited acid; swabbed to recover load.

3/22/00 - Tstd tbq to 6000# on TIH. Displaced, circ csg w/ 160 bbl FW & 44 gal CI-76. Pressured csg to 505#, charted 30 min. integrity test. Notified NMOCB but no representative present during test.

Return to active status.

Initial pressure: 510 #

15 min: 500#

30 min: 480#

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

SIGNATURE

Laura Clepper

TITLE Regulatory Analyst

DATE 03-31-00

TYPE OR PRINT NAME Laura Clepper

TELEPHONE NO. 915/498-8662

(This space for State Use)

APPROVED BY

SIGNED BY
SUE WINK
FIELD REP II

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JCS

