## Submit 3 Copies to Appropriate District Office

## State of New Mexico E \_\_\_\_\_y, Minerals and Natural Resources Departmer \_\_\_\_\_

Form C-103 Revised 1-1-89

OCT 1 0 1995

- DATE

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

310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503

WELL API NO. 01540

	<u> 30-025 -</u>	87	165
5.	Indicate Type of Lease STATI	EΧ	FEE
6.	State Oil & Gas Lease No.	D	

	B-2516			
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.)	7. Lease Name or Unit Agreement Name			
1. Type of Well:				
2. Name of Operator  WELL OTHER Water Injection	SMGSAU Tr 6			
	8. Well No.			
3. Address of Operator Operating Company	9. Pool name or Wildcat			
P.O. Box 52070 Midland, Texas 79710	Maljamar Grayburg San Andres			
Unit Letter M: 660 Feet From The South Line and 66	Feet From The <u>West</u> Line			
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	MPM Lea County			
N/A N/A				
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
	SEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING			
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING O	<del></del>			
PULL OR ALTER CASING  CASING TEST AND CEMENT JOB				
OTHER DESIGNATION OF THE PROPERTY OF THE PROPE				
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, include work) SEE RULE 1103.				
Rig up well service rig. Released pkr. Pulled tbg &				
bit and casing scrapper. Frac'd Grayburg with 30,000 gals 35 ppt guar gelled				
borate cross-linked water carrying 45,000 # 12/20 Brady sand. Cleaned frac sand				
out of well. Ran nickle plated Guiberson Uni-VI pkr and 2%" IPC tbg. Circ				
they/csg annulus with pkr fluid (corrasion inhibited wtr). Set phr@ 4160'. Pressure				
test they / csy annulus for 30 minutes on chart. Returned well to injection.				
Final Report 9/14/95.				
That implies the same of the s				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Kay F. Martin TITLE Operations Engineer DATE 16/2/95				
	TELEPHONE NO. (915) 682 - 8873			
(This space for State Use) ORIGINAL SIGNED BY SPERY SEXTON	1021 NO. (113 / 682 - 8813			

... TITLE ...

APPROVED BY

DISTRICT I SUPPLAYISOR

