

UNITED STATES RECEIVED
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

MAY 7 8 32 AM '90
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 Form 9-331-C for such proposals.)

1. oil ☐ well gas ☒ well other

2. NAME OF OPERATOR

Robert N. Enfield

3. ADDRESS OF OPERATOR

P. O. Box 2431, Santa Fe, NM 87504-2431

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 660' FNL & 1980' FEL Sec. 29

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☒

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☐

SUBSEQUENT REPORT OF:

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5. LEASE

LC 069276

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hudson "29" Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Corbin, S., ~~Narrow~~ Bone Spring

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

29, T-18-S, R-33-E

12. COUNTY OR PARISH 13. STATE

Lea

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3799'

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operations. **Procedure** directionally drilled, give subsurface locations and

1. Move-in and rig-up pulling unit; move manual BOP to location (BOP on location in case tubing must be pulled on short notice).

2. Set necessary tanks to hold frac fluids and for swab/flow test.

3. Fracture treat perforations with 65,000 gallons of Versa Gel 1400 (or equivalent) with 120,000# of 20/40 sand at approximately 25 barrels per minute (Halliburton recommendation).

4. Swab and/or flow test to tanks.

If flow rate is satisfactory, and test indicates well will flow for some time, shut-in for pressure build-up and well test. If not continue as follows.

5. Kill well with 3% KCL water with additives.

6. Rig down well head and nipple-up B O P.

7. Release packer and pull out of hole.

8. Run tubing for pumping installation; set tubing appx. 200' above perforations; use an anchor/catcher.

9. Run pump and rods; set pumping unit with gas engine.

10. Pump well to clean-up and run potential test.

11. After 1,000+ barrels of fluid recovered, and the first time it is necessary to have a unit on location, lower tubing to place perforated nipple below perforations.

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

SIGNED Robert N. Enfield TITLE Operator

DATE 5/1/90

(This space for Federal or State office use)

ACCEPTED FOR RECORD
JL

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 5/14/90

CARLSBAD, NEW MEXICO