

UNITED STATES M. OIL CONS. COMMISSION
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

DATE
ON

Form approved.
Budget Bureau No. 1004-1
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC 067982 B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

McKay Shell Federal

9. WELL NO.

1

10. FIELD AND POOL OR WILDCAT

North
Lusk Morrow

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

Sec. 3, T19S, R32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Petroleum Development Corporation

3. ADDRESS OF OPERATOR

9720 B Candelaria N.E. Albuquerque, NM 87112

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below

At surface

Unit L
2310' FSL & 990' FWL Sec. 3 19S, 32E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3684' KB

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Pressure Test Production Casing x

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

17. 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.)

Move in pulling unit: Kill well w/pump truck 2% KCL water
Unset Guiberson Uni-sit Packer @ 12545'
Pull tubing & packer
Hydro Test Tbg. back in hole open ended w/2 3/8" seat nipple to 12545'
Place well back on line operating with plunger lift

OCT 2 8 52 AM '89

RECEIVED

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

SIGNED

TITLE

Production Manager

DATE

8-31-89

(This space for Federal or State Office Use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

CARLSBAD, NEW MEXICO *See Instructions on Reverse Side