

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TF
(Other instruct.
verse side)

(CATE*
OD re-

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO

NM 025497

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jennings B Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Northeast Lusk Yates/Seven Rivers

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

Sec. 15-T-19S-R32E

12. COUNTY OR PARISH

13. STATE

Lea

NM

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—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ WIW

2. NAME OF OPERATOR

Sun Expl. & Prod. Co.

3. ADDRESS OF OPERATOR

P.O. Box 1861, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

Unit Letter N, 660' FSL & 1980' FWL

14. PERMIT NO.

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

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) Change fm SWD to WIW

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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 perti-
nent to this work.)

Attached Sundry notice approved 6/8/84, showed well as converted to WIW. All
Federal & State records still carry the well as a SWD. Please change classification
of well to WIW.

ACCEPTED FOR RECORD

JUL 30 1987

SJS

CARLSBAD, NEW MEXICO

Subject to
Like Approval
by State

RECEIVED
JUL 22 10 50 AM '87
CARLSBAD RESOURCE
AREA HEADQUARTERS

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

SIGNED

Velma Reyes

TITLE

Sr. Accounting Assistant

DATE 7/20/87

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 ☐ gas ☐ other ☒ WIW
well well

2. NAME OF OPERATOR

Sun Exploration & Production Co.

3. ADDRESS OF OPERATOR

P. O. Box 1861, Midland, Texas 79702

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

AT SURFACE: Unit Ltr. N

AT TOP PROD. INTERVAL: 660' FSL & 1980' FWL

AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) deepened thru Seven Rivers

5. LEASE

NM 025497

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jennings B Federal

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Northeast Lusk Yates/Seven Rvrs

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

Sec. 15, T-19-S, R-32-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

14. API NO.

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

(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 work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

- 11-8 MIRU Ran WS, NU BOP, POH w/2-3/8 cmt lined tbq, Otis Perma-Latch pkr, MIRU Star Tool, RIH w/4-3/4, 10 - 3-1/2 on 2-7/8 WS, tag PBD @ 3064, circ hole cln w/lse wtr
- 11-9 Broke circ, drill cmt, FC @ 3074, Drill hard cmt to 3100, Drill Guide shoe 3100-3101, Drill formation 3101-3140, circ hole cln, raise bit to 3000'
- 11-10 Lower Bit to 3140 drill 3140-3172, POH, Change out bit, RIH w/4-3/4 bit, 10 - 3-1/2 D on 2-7/8 WS, Drill 3172-3185 circ hole cln, raise bit to 3000'
- 11-11 Lower bit, tag 3185, break circ, drill 3185-3217, losing returns @ 1 BPM rate, circ hole cln, raise bit to 3000
- 11-13 MIRU Triplex pump, broke circ, lower 2-7/8 WS, 4-3/4 bit, tag & drill 3217-3282, losi 3 BPM, circ hole cln, raise bit to 3000
- 11-14 POH w/2-7/8 WS, DC, bit, RIH w/252' 2-7/8 tail pipe, 5-1/2 RTTS pkr on 2-7/8 WS, tag @ 3281 PBD, set pkr @ 2838, tail pipe @ 3094, press annulus to 500, Howco acdz OH 3100-3281 w/10,000 gals 15% NEHCL in 5 equal stages, w/200# GRS in 200 gals GBW betwe each stage, flush w/2% KCL wtr, BDP 1000, Max 1000, Min 0, AVG 345, FP 800 (cont'd.)
- Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED

TITLE Associate Accountant

DATE 12-5-84

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL IF ANY

RECEIVED

DEC 13 1984

O.C.S.
HOSPITAL E

Sun Exploration & Production Co.
Lease NM 025497
Jennings B Federal - Well No. 2

Cont'd.

17. 11-14 (cont'd) Released Pkr, lower & tag @ 3281, POH lay dwn 2-7/8 WS
11-15 RIH w/Otis Perma-latch pkr w/on & off tool w/1.50 "N" nipple,
on 2-3/8 cmt lined tbg, set pkr @ 2891, displaced annulus w/treated
pkr fluid, set pkr in 10,000# tenison, test annulus to 500 psi,
start inj 1.3 BPM on vac