

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)
RECEIVED

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

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		2. NAME OF OPERATOR Manzano Oil Corporation 505/623-1996		3. ADDRESS OF OPERATOR P.O. Box 2107/Roswell, NM 88202-2107		4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2450' FSL & 660' FWL Sec 25		5. LEASE DESIGNATION AND SERIAL NO. NM-14790	
14. PERMIT NO. 30-025-27740		15. ELEVATIONS (Show whether SP, BT, GR, etc.) 3587' GR		7. UNIT AGREEMENT NAME		8. FARM OR LEASE NAME McKamey Federal		9. WELL NO. 1-Y	
				10. FIELD AND POOL, OR WILDCAT East Lusk (Morrow)		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec 25-T19S-R32E		12. COUNTY OR PARISH Lea	
						13. STATE NM			

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☒
(Other) ☐

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 pertinent to this work.)*

1/31/89 Rigged up Clark Well Service & Welex. Set CIBP @ 13,380 & perforated the Upper Morrow 13,326 to 13,335 (9', 18 holes). Set packer @ 13,265 & swabbed well dry. Acidized w/1000 gal More Flo acid & 15,000 standard cubic feet of nitrogen with 15 ball sealers. Flowed & tested well.

Preparing to move to the Wolfcamp formation, set CIBP & attempt completion.

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

SIGNED Jackie Midkiff TITLE Jackie Midkiff/Landwoman DATE 1/31/89

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY: _____

ACCEPTED FOR RECORD
DATE _____

FEB 21 1989

*See Instructions on Reverse Side

SJS
CARLSBAD, NEW MEXICO

RECEIVED

FEB 24 1989

OCB
HOBBS OFFICE

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2. LEASE DESIGNATION AND SERIAL NO.
NM-14790

3. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

McKamey Federal

9. WELL NO.

1-Y

10. FIELD AND POOL, OR WILDCAT

East Lusk (Morrow)

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

Sec 25-T19S-R32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Manzano Oil Corporation 505/623-1996

3. ADDRESS OF OPERATOR
P.O. Box 2107/Roswell, NM 88202-2107

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

2450' FSL & 660' FWL Sec 25

14. PERMIT NO.

30-025-27740

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

3587' GR

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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

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nent to this work.)*

1/13/89 - 1/16/89

RU Clarke Well Service. RU Halliburton to acidize. Acidized perfs 13,454-60, 13,531-35
& 13,646-50 w/3000 gal More-flo BC 7-1/2% & 5000 gal SCF pad nitrogen. Swabbed well
and rigged down.

ACCEPTED FOR RECORD

JAN 26 1989

EB
CARLSBAD, NEW MEXICO

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

SIGNED

TITLE Jackie Midkiff/Landwoman

DATE 1/17/89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side