

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-26692

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "26-A"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Corbin, S. (Queen)

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

Sec 26-T18N-R33E

12. COUNTY OR PARISH

Lea

13. STATE

NM

1. OIL ☒ GAS ☐ OTHER ☐

2. NAME OF OPERATOR

J. M. Huber Corporation

3. ADDRESS OF OPERATOR

7120 I-40 West, Suite 100, Amarillo, Texas 79106

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

At surface

660' FSL & 1980' FWL of Section 26

14. PERMIT NO.

30-025-29249

15. ELEVATIONS (Show whether DF, ST, OR, etc.)

GR 3814'

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) Recomplete to Queen

(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.)*

12/26/90 Set drillable CIBP at 8960' and capped with 10' cement to temporarily abandon the Bone Spring perforations 9033' to 10,219' O.A.

Perforated Queen 4532-49' w/2 HPF

Acidized perforations 4532-49' w/1500 gals 15% HCl

12/28/90 Fracture stimulated perforations 4532-49' w/23,000 gals water and 50,000 lbs sand

12/31/90 Ran production equipment back in well.

1/01/91 Returned well to production.

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

SIGNED

Robert L. Cornelius
Robert L. Cornelius

TITLE

District Engineer

DATE

1/10/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side