

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

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.)

Nov 7 11 54 AM '90

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

J. M. Huber Corporation

3. ADDRESS OF OPERATOR

7120 I-40 West, Ste 232, 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, Sec. 26-18S-33E

Unit 7

14. PERMIT NO

30-025-29249

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

GR: 3814

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "26-A"

9. WELL NO.

1

10. FIELD AND POOL OR WILDCAT

EK Bone Spring

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

Sec. 26-18S-R33E

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:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

Recomplete to Queen

X

SUBSEQUENT REPORT OF:

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.)*

A. Set drillable CIBP @ 8960' and cap w/ ^{50'} ~~10'~~ cement to abandon Bone Spring perforations 9033' to 10,219' OA.

B. Perforate Queen 4532' to 4549' w/ 2 SPF.

C. Acidize perforations 4532' to 4549' w/ 1500 gals 15% HCl.

D. Fracture stimulate perforations 4532' to 4549' w/ 28,000 gals water and 50,000 lbs. sand.

E. Return well to production.

The proposed recompletion will be performed during December, 1990. Production from the Bone Spring perforations is no longer economical.

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

SIGNED

Robert L. Cornelius

TITLE

District Engineer
806/353-9837

DATE

11-06-90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

11-8-90

CONDITIONS OF APPROVAL, IF ANY: