

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR.  
(Other instruction  
reverse side)

DATE  
ON RE-

Form approved.  
Budget Bureau No. 1004-013-  
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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Oryx Energy Company	8. FARM OR LEASE NAME Mescalero Ridge "D" Federal
3. ADDRESS OF OPERATOR P.O. Box 26300, Oklahoma City, O.K. 73126-0300	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below) At surface Unit Ltr. B, 330' FNL & 2000' FEL	10. FIELD AND POOL, OR WILDCAT Mescalero Escarpe Bone Spr
14. PERMIT NO. 30-025-29508	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 14, T18S, R33E
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 3972.8' GR	12. COUNTY OR PARISH Lea
	13. STATE New Mexico

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

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.) \*

STIMULATE BONE SPRINGS FORMATION W/ XYLENE/HCL:

PROCEDURE

1. MIRU PUMP TRUCK W/ 500 GALS XYLENE. DUMP XYLENE DOWN CSG & TURN FLOWLINE INTO CSG. START WELL PUMPING & CIRCULATE XYLENE OVERNIGHT.
2. MIRU WS RIG. POOH STANDING WITH 86 KD ROD STRING & 2 1/2 X 1 1/2 X 24' RHBC ROD PUMP, & GA. REMOVE WH. INSTALL BOP. POOH W/ 2 7/8", 6.5#, J-55 TBG, TAC, SN, MA.
3. RIH W/ 5 1/2" RBP BELOW ORYX OWNED RDG PKR W/ SN ON 2 7/8", J-55 TBG. SET RBP @ 8800'. PU RDG PKR TO 8650'. DROP SV & TEST TBG TO 2500#. RET SV.
4. MIRU HALLIBURTON. PUMP TRUCK & LINES. TEST LINES TO 3000#. ACIDIZE BONE SPRINGS PFS 8710-8794' W/ 3000 GALS HCL @ 3-5 BPM, MAX WHTP 2500# AS FOLLOWS: SPOT 2000 GALS 15% NEFE HCL W/ PARAFFIN DISPERSANT TO PKR @ 8650'. SET PKR W/ 15,000# COMP. PUMP 1000 GALS 15% NEFE HCL W/ PARAFFIN DISP. FLUSH TO TOP PERF W/ 52 BBLS 2% KCL.
5. SWAB BACK ACID & LOAD WTR. RLSE PKR, LWR TBG & LATCH ONTO RBP. PU & RESET RBP @ ± 8450'. PU TBG & PKR TO 8425' & TEST RBP TO 2500 PSI WHP. PU TBG & PKR TO 8300'.

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

SIGNED Jan Stevenson

TITLE Proration Analyst

DATE Oct. 21, 1991

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 11/12/91

\*See Instructions on Reverse Side