

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Amoco Production Company

3. Address and Telephone No.

P. O. Box 3092, Houston, TX 77253 Rm. 17.182

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FNL X 1980' FEL (unit G, SW/4, NE/4)
Sec. 6, T-19-S, R-33-E

5. Lease Designation and Serial No.

NM-077002

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Nellis Federal No. 4

9. API Well No.

30-025-29680

10. Field and Pool, or Exploratory Area

Buffalo Yates

11. County or Parish, State

Lea, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Cement Squeeze, Fracture
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Rig up service unit.

RIH with cmt retainer. Set at 3520' between perfs at 3485'-3494' and 3550'-3558'.

Establish communication between perfs.

Squeeze channel with mattrix cmt. WOC.

Drill out cmt. Pressure test to 500 psi for 30 min.

Perf 3550'-3558' w/4SPF.

Set pkr @ 3520' and load backside & maintain pressure during acid & frac treatment. Acidize w/1000 gals 7-1/2% HCL. Frac procedure: J-20L gel 8 gal/1000, B-31 gel breaker catalyst/buffer 2 gal/1000, B-33 enzyme gel breaker 1#/1000, 2.5#/1000 CL-2 Crosslink, 16/30 Ottawa or Jordan sand, NE agent (Nine-40), Aquaseal ws 20#/1000 gal, Frac cide 20 0.4#/1000 gal.

Swab.

Rig down service unit.

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

Signed Karin A. Almus

Title Asst. Admin. Analyst

Date 3/16/92

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date 4-1-82