

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN THE
(Other) (Initial)
DATE

Form approved.
Budget Bureau No. 1004-01
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC 065710

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Amoco Federal

9. WELL NO.

#2

10. FIELD AND POOL OR WILDCAT

West Lusk Delaware

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

21, T19S, R32E

12. COUNTY OR PARISH 13. STATE

Lea

New Mexico

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Woodbine Petroleum, Inc.

3. ADDRESS OF OPERATOR

1445 Ross Ave., Suite 5600 Dallas, TX 75202

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

990' FNL & 1650' FWL

14. PERMIT NO.

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

3596 GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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 perti
nent to this work.) *

On April 6, 1989 perforated well from 6489' to 6496', 7', 2 shots per foot. On
April 8, 1989 acidize w/1500 gals. 15% acid breakdown pressure 3200#.

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

SIGNED

TITLE Executive Vice President

DATE 4/13/89

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

DATE

CONDITIONS OF APPROVAL, IF ANY:

APR 21 1989

*See Instructions on Reverse Side

SJS
CARLSBAD, NEW MEXICO

RECEIVED

APR 28 1989

OCD
HOBBS OFFICE