

Form 3160-5
(June 1990)

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

5. Lease Designation and Serial No.
LC 069420

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

SOUTHLAND ROYALTY COMPANY

3. Address and Telephone No.

P.O. Box 51810 Midland, TX 79710

915-688-6943

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

NW/NW OF SEC. 7, T18S, R33E

660' FNL & 330' FWL

8. Well Name and No. **WEST CORBIN**

FEDERAL NO. 19

9. API Well No.

30-025-3080700

10. Field and Pool, or Exploratory Area

NORTH YOUNG (BONE SPRING)

11. County or Parish, State
LEA COUNTY, 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 **PULL THE ESP & REACIDIZE**
L
- ☐ 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.)*

1. MIRU PULLING UNIT. ND WH. NU BOP. POOH W/TBG AND PMP.

2. RIH W/SONIC HAMMER SHEAR SLEEVE, SN AND TBG CHECK VALVE ON TBG TO THE TOP SET OF PERFS AT 8500'. NU BIW STRIPPING HEAD AND ENOUGH CHICKSANS AND STEEL LINE NECESSARY FOR TOOL MOVEMENT ACROSS THE PERFORATED INTERVALS. 3. MIRU STIMULATION CO. NU SURFACE LINE AND TEST TO 4000 PSI. MONITOR THE 2 7/8 X 5 1/2 ANNULUS. PMP THE AE AROMATIC ACROSS THE VARIOUS PERFORATION INTERVALS. RECIPROCATATE THE SONIC HAMMER ACROSS THE PERFORATIONS WHILE PMPING THE E AROMATIC FLUID. FLUSH W/2% KCL WATER CONTAINING 2 GPT OF TFA-380B (SURFACTANT).

4. DROP BALL TO OPEN SHEAR SLEEVE. RU TO SWAB. SWAB BACK LOAD RECORDING RATE, VOLUMES AND CUTS.

5. ND BIW STRIPPING HEAD. POOH W/SONIC HAMMER. REPLACE SHEAR SLEEVE. RIH W/SONIC HAMMER, SHEAR SLEEVE, SN AND TBG CHCK VALVE ON TBG TO THE TOP OF PERFS AT 8500. NU BIW STRIPPING HEAD AND ENOUGH CHICKSANS AND STEEL LINE NECESSARY FOR TOOL MOVEMENT ACORSS THE PERFORATED INTERVALS.

6. NU SURFACE LINES AND TEST TO 4000 PSI. MONITOR THE ANNULUS. PMP PENTOL 250 (15% NEFE HCL ACID) ACROSS THE VARIOUS PERFORATIONS.

7. DROP BALL TO OPEN SHEAR SLEEVE. RU TO SWAB. ND BIW STIRPPING HEAD. POOH W/SONIC HAMMER.

8. RIH W/SUBMERSIBLE PMP, SN AND TBG. SET PMP AT PREVIOUSLY SET DEPTH. ND BOP. NU WH. RDMO.

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

Signed

Donna Williams **DONNA WILLIAMS**

Title **PRODUCTION ASSISTANT**

Date **1/27/94**

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date

2/10/94