

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR'  
(Other instructions  
verse side)

CATE  
ON RE

Form approved.  
Budget Bureau No. 1004-1.1  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 078148

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

French, 9004 JV-P

9. WELL NO.

2

10. FIELD AND POOL OR WILDCAT

Corbin South (Wolfcamp)

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

Sec. 24, T18S, R32E

12. COUNTY OR PARISH; 13. STATE

Lea

NM

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

BTA Oil Producers

3. ADDRESS OF OPERATOR

104 S. Pecos, Midland, TX 79701

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

1980' FSL & 510' FEL

Unit I

14. PERMIT NO.

30-025-31118

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

3797' GR 3812' RKB

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 COMPLETE ☐

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.)\*

1-8-91 Spudded 3:00 p.m., Drlg 17-1/2" hole, Cmtd 13-3/8" (10 jts 61# K55 STC) csg @ 416' w/450 sx PD: 4:00 a.m. 1-9-91, Cmt circ, WOC 6 hrs, Cut off csg,

1-9-91 Installed csg head & BOP's, Cleaned out to shoe, Tested BOP's & csg to 1500 psi for 30 mins on fresh wtr, WOC 18 hrs total, then drld shoe, Drlg 11" hole.

1-10-91 Depth 1316', Drlg 11" hole.

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

SIGNED

Dorothy Houghton

TITLE Regulatory Administrator

DATE 1-11-91

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side