Form 9-331 Dec. 1973

## UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

SUNDRY NOTICES AND REPORTS ON WELLS

	Budget Bureau No. 42-R1424			
	5. LEASE			
	NM-052			
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
	7. UNIT AGREEMENT NAME			
nt	7. UNIT AGREEMENT NAME			
i c	8. FARM OR LEASE NAME			
	Mescalero Ridge Unit 35			
	9. WELL NO.			
	2			
	10. FIELD OR WILDCAT NAME			
	Pearl Queen			
7	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA			
	35-19S-34E			
	12. COUNTY OR PARISH 13. STATE			
	LEA N.M.			
 -,	14. API NO.			
-é	15 FLEVATIONS (CHOW DE VED AND WE)			
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3705' GR			
b a ner	e all pertinent details, and give pertinent dates, irectionally drilled, give subsurface locations and it to this work.)*			
mpl assy. Perf'd add'l Queen zone @				
, 5035' w/l JS ea interval. Set pkr				
NE wtr, 20 bbls wtr cont'g Hib-234, NE-HCL, 750# block, 25 bbls NE wtr,				
aC1, 2500 gals 15% NE-HCL, flushed				
compl assy & returned to production.				
s on 15-48" spin Gift Rentry				
JAN 9 1980				
U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO				
	Set @ Ft.			
	Funt page 1/8/80			

HOBBS, NEW MELIUO

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME  Mescalero Ridge Unit 35  9. WELL NO.  2  10. FIELD OR WILDCAT NAME  Pearl Queen  11. SEC., T., R., M., OR BLK. AND SURVEY OR			
1. oil gas other				
2. NAME OF OPERATOR ARCO O'll and Gas Company Division of Atlantic Richfield Company				
3. ADDRESS OF OPERATOR				
Box 1710, Hobbs, New Mexico 88240				
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17				
below.) 1980' FSL & 1980' FEL, Unit 1tr J	35-19S-34E	7		
AT SURFACE:	12. COUNTY OR PARISH			
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	LEA	N.M.		
	14. API NO.			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15 FLEVATIONS (CHOW DE VOD AND WD)			
KEI OKI, OK OTTEK DAIN	15. ELEVATIONS (SHOW DF, KDB, AND WD)  3705' GR			
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3703 (4)(			
TEST WATER SHUT-OFF				
FRACTURE TREAT				
SHOOT OR ACIDIZE X X REPAIR WELL X	(NOTE: Dancet require of m			
PULL OR ALTER CASING	(NOTE: Report results of m change on Form 9			
MULTIPLE COMPLETE				
CHANGE ZONES				
ABANDON* L] L] (other)				
(other)				
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.)*				
On 4/27/79 rigged up, installed BOP & POH w/compl assy. Perf'd add'l Queen zone @ 4559, 4571, 4595, 4605, 4616, 4915, 4924, 4934, 5035' w/l JS ea interval. Set pkr @ 4515'. Acidized perfs 4559-5219' w/25 bbls NE wtr, 20 bbls wtr cont'g Hib-234, 55 gals 15% NE-HCL w/200# CaCl, 2500 gals 15% NE-HCL, 750# block, 25 bbls NE wtr, 20 bbls Hib S-234, 55 gals 15% NE-HCL w/200# CaCl, 2500 gals 15% NE-HCL, flushed w/31 BFW. Swbd back load. POH w/pkr. RIH w/compl assy & returned to production. On test 12/28/79 pmpd 9 BO, 92 BW, gas not meas on 15-48" spin Final Report				
	Ai,	N 9 1980		
	UDB			
	U. S. GEO HOBB	DLOGICAL SURVEY S, NEW MEXICO		
Subsurface Safety Valve: Manu. and Type	Še	t @ Ft.		
18. Thereby certify that the foregoing is true and correct				
SIGNED TITLE Dist. Drlg.	Supt_ date1/8/80	<u></u>		
(This space for Federal or State of	fice use)			
APPROVED BYTITLE	DATE			
CONDITIONS OF APPROVAL, IF ANY:	No. of the last	ard		
*See Instructions on Reverse	Side	. s. stal de bal salave		

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OIL CONSERVATION DIV.