			I CONS. DIVISION	
		P.O. Box 19(Hobbs, NM 88241	FORM APPROVED Budget Bureau No. 1004-0135 Expires March 31, 1993	
A for proposals to drill or to Ise "APPLICATION FOR F SUBMIT IN Other GY CORPORATION (NEVADA) NO. COADWAY, SUITE 1500, OKLAN ge. Sec., T., R., M., or Survey Descr	deepen or reentry to a diffe PERMIT—" for such propos TRIPLICATE HCIMA CITY, OKLAHOMA 73102	erent reservoir. sals	 Lease Designation and Serial No. NM -NM052 If Indian, Allottee or Tribe Name N/A If Unit or CA, Agreement Designation 891007465B Well Name and No. Mescalero Ridge 35 Unit #15 API Well No. 30-025-21683 Field and Pool, or Exploratory Area Pearl (Queen) County or Parish, State Lea Cnty, New Mexico 	
PROPRIATE BOX(s) T	O INDICATE NATURE C	OF NOTICE, REPOR	T, OR OTHER DATA	
BMISSION	TYPE OF ACTION			
	Abandonment Recompletion Plugging Back Casing Repair Altering Casing		Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection	
	DEPARTMENT BUREAU OF LAN SUNDRY NOTICES AN for proposals to drill or to se "APPLICATION FOR F SUBMIT IN Other GY CORPORATION (NEVADA) No. OADWAY, SUITE 1500, OKLAN ge. Sec., T., R., M., or Survey Descr L, Unit A, Section 35-T19 PROPRIATE BOX(s) To	DEPARTMENT · THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS for proposals to drill or to deepen or reentry to a diff se "APPLICATION FOR PERMIT—" for such propos SUBMIT IN TRIPLICATE Other GY CORPORATION (NEVADA) No. OADWAY, SUITE 1500, OKLAHCIMA CITY, OKLAHOMA 73102 ge. Sec., T., R., M., or Survey Description) L, Unit A, Section 35-T19S-R34E, Lea Cnty, NM PROPRIATE BOX(s) TO INDICATE NATURE C BMISSION Abandonment Recompletion Plugging Back	DEPARTMENT 'THE INTERIOR BUREAU OF LAND MANAGEMENT P.O. Box 19(Hobbs, NM 8824 SUNDRY NOTICES AND REPORTS ON WELLS for proposals to drill or to deepen or reentry to a different reservoir. se "APPLICATION FOR PERMIT—" for such proposals SUBMIT IN TRIPLICATE Other GY CORPORATION (NEVADA) No. OADWAY, SUITE 1500, OKLAHCIMA CITY, OKLAHOMA 73102 (405) 235-3611 ge Sec., T., R., M., or Survey Description) L, Unit A, Section 35-T19S-R34E, Lea Cnty, NM PROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPOR BMISSION TYPE OF ACTION Abandonment Recompletion Plugging Back	

12-16-97 RU. TOH with rods, pump and tubing. Ran 1 jt tubing and SI. RD pulling unit. WO conversion to WIW.

04-21-98 thru 05-04-98 RU. NU BOP. Rar Arrow AD-1 packer to 4510' and set. Press tested 5 1/2" casing to 320 psi for 30 mins, held OK. TOH with 2 3/8" tubing and packer. Ran bit and DC's to clear hole to PBTD 5134'. Circ'd hole clean. Ran packer, set at 4698'. RU BJ Services. Acidized perfs 4738-4971' down tubing with 2000 gals 10% HCl + 300# rock salt at AIR 3.8 BPM with 1960 psi. ISIP 1301 psi TOH with packer. Ran RBP and packer, set RBP at 4698' and press tested to 1000 psi. Set packer at 4510'. Loaded casing, press'd annulus to 300 psi. Acidized perfs 4585-4637' down tubing with 2000 gals 10% HCl + 300# rock salt at AIR 4 BPM with 1580 psi. ISIP 530 psi. TOH with RBP. Reran packer, set at 4510'. Swabbed dry. TOH with packer. WO IPC tubing. Ran 142 jts 2 3/8" IPC 4.7# J-55 8rd tubing and nickle coated inverted LocSet packer, set at 4499'. Circ'd casing with packer fluid. Latched onto packer. ND BOP, NU wellhead. Press tested casing to 300 psi for 30 mins, held OK. See attached chart copies.

Covered all pits, back drug location, patched holes in road. Dug out old injection line. Ditched for new FW injection lines. Worked to unplug sump pump at station. Made all connections. Made road crossing. Backed filled ditch.

05-05-98 Commenced injection at 1600 hrs. Worked to unplug valves, etc. Injecting approx 400 BWPD initially.

14. I hereby certify that the foregoing is true and correct		
Signed Candace R. Araham		Date
(This space for Federal or State office use) Approved by	AUG 0 5 1998	Date
Conditions of approval, if any:	GARY GOURLEY BLM	
Title 18 U.S.C. Section 1001, makes it a crime for any person knowin to any matter within its jurisdiction.	ngly and willfully to make to any department or agency of the United State	s any false, fictitious or fraudulent statements or representatio
JCS GWW	*See Instruction on Reverse Side	H-de

JCS GWW



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