

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DENOMINATION AND SERIAL NO. NM-4312	
2. NAME OF OPERATOR Chama Petroleum Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 5015 Tracy Street, Dallas, Texas 75205		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 660' FEL		8. FARM OR LEASE NAME Pennzoil Federal	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3,776' GL		10. FIELD AND POOL, OR WILDCAT Undesignated North Quail Ridge Marrow	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12, T-19-S, R-33-E	
		12. COUNTY OR PARISH Lea	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Remedial Work Report <input checked="" type="checkbox"/>	

(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 some pertinent to this work.)*

- 9-5-80: Moved in & rigged up McChase, blew well down, had slight flow, moved in 500 bbl. frac tank, loaded with 300 bbl. 10 lb. brine, 3% KCL water & 30 gal. tretolite corrosion inhibitor, laid flow line to pit, removed flow line riser, SDFN.
- 9-6-80: Shut-in Pressure -0-, rigged up kill truck to tubing, pumped 77 bbls. treated casing fluid down tubing, put 4 bbl. water in formation at 400 psig, released stinger from packer, picked up & removed wrap around & wellhead, installed BOP, rigged up kill truck to casing, pumped 42 bbls. to load tubing & casing on vacuum, laid down 3 joints & 2 pump joints, came out of hole, picked up Baker plug assembly & 2 joints tubing, ran plug on sand line, set plug in Baker "D" packer, sheared off & came out of hole with setting tool, loaded hole with 60 bbls. treated casing fluid, pressured plug to 1000 psig for 15 min., held O.K. Released pressure, went in hole with junk basket, gauge ring & collar locator, found plug assembly at 13,274', plugged back total depth 13,274' KB. Put 2 sacks 20-40 mesh sand down casing, SDFN
- 9-7-80: Shut Down for Sunday
- 9-8-80: Went in hole open ended & set bottom of tubing at 13,212', pressured to 2500 psig to test plug & BOP, tested O.K. Spotted 250 gal. 10% acidic acid from 13,212' to 12,954', released rams & came out of hole keeping hole full. SDFN

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

SIGNED [Signature] TITLE President

DATE 10-1-80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

DATE

RECEIVED

OCT 20 1980

O. C. D.
ARTESIA, OFFICE

RECEIVED

OCT 20 1980

OIL CONSERVATION DIV.