

SUNDRY NOTICES AND REPORTS ON WELLS

1. NAME OF WELL WELL NO. ☒ OTHER ☐ Dry Hole		2. NAME OF LESSEE Wallen Production Co. Walter W. Krug D.B.A.		3. NAME OF LESSEE Wallen Federal 19	
4. ADDRESS OF OPERATOR P.O. Box 1960 Midland, Texas 79702		5. WELL NO. 2		6. FIELD AND POOL, OR WILDCAT South Tonto Yates- 7-Rivers	
7. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) AT SURFACE 990' FWL & 1650' FSL		8. SEC., TWP., R., OR FILE AND SECTION OR AREA Sec 19, T 19 S, R 33 E		9. COUNTY OR PARISH Lea County	
10. ELEVATIONS (Show whether DT, RT, OR, etc.) GR 3602		11. COUNTY OR PARISH Lea County		12. STATE New Mexico	

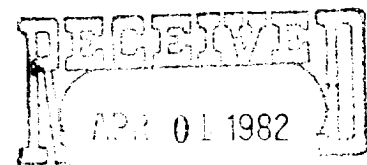
13. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETION ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☒
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	

(NOTE: Report results of multiple completion on Well Completion or Re-completion 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).*

On 3/26/82 we filled the hole from TD of 3185' to 2485' ,with 60 sxs of Class H neat, through 2 3/8" tubing. We left it for 18 hrs (overnight) and tagged it with tubing in the morning. The plug was there. We raised the tubing 3' and filled the hole with 50 sxs of fresh H₂O gel and fresh H₂O. We then pulled the tubing to 1400' and set a 200' plug with 15 sxs Class H cement. We will cement the top with 15 sxs and place marker by hand.



Oil & Gas
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

SIGNED Walter W. Krug TITLE Engineer DATE 3-29-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 5-22-86

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
MAY 26 1986
O.C.D.
HOBBS OFFICE

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM-077004	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other <u>Plug & Abandon</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Wallen Production Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 1960, Midland, Texas 79702		8. FARM OR LEASE NAME Wallen Federal 19	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' FSL and 990' FWL At top prod. interval reported below At total depth same		9. WELL NO. 2	
14. PERMIT NO. None available		DATE ISSUED 12/1/81	
10. FIELD AND POOL, OR WILDCAT Seven Rivers		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 19, T 19 S, R 33 E	
12. COUNTY OR PARISH Lea		13. STATE New Mexico	
15. DATE SPUDDED 1/2/82	16. DATE T.D. REACHED 2/27/82	17. DATE COMPL. (Ready to prod.) P & A	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* GR 3602
19. ELEV. CASINGHEAD P & A	20. TOTAL DEPTH, MD & TVD 3185'	21. PLUG, BACK T.D., MD & TVD P & A	22. IF MULTIPLE COMPL., HOW MANY* P & A
23. INTERVALS DRILLED BY →	24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* P & A	25. WAS DIRECTIONAL SURVEY MADE No	26. TYPE ELECTRIC AND OTHER LOGS RUN
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) P & A		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
35. LIST OF ATTACHMENTS		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
SIGNED <u>Walter H. King</u>		TITLE <u>Engineer</u>	
DATE <u>4/8/86</u>			

*(See Instructions and Spaces for Additional Data on Reverse Side)

GEOLOGIC MARKERS

Cable Tool

RECEIVED
APR 14 1986
C.C.D.
HOBBS