

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 57285
2. NAME OF OPERATOR MorOilCo, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Drawer 1 Artesia, NM 88211-0269		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 330' FNL 330' FEL Unit A		8. FARM OR LEASE NAME Stivason Federal
14. PERMIT NO.		9. WELL NO. #1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3694.9		10. FIELD AND POOL, OR WILDCAT North San Miguel 7 River
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 33 - 19S - 34E
		12. COUNTY OR PARISH Lea
		13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Squeeze Zone</u>	
(Other) <input 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 zones pertinent to this work.)\*

2/28/87 Squeeze perforations 3908' - 14' with 150 sx. "C", flocele, .03% Halad - 9. Walk squeeze to 2000# & shut well in.

3/02/87 Tag top of cement at 3670' approx. Drill out cement. Test well to 1500# for 15 min. No decrease in pressure. Circulate hole clean & put on pump.

4/09/87 Squeeze perforations 4010' - 24' with 250 gal. 15% acid to break down zone, cement with 75 sx. "C" Neat. Squeeze to 2200# and leave shut-in.

4/11/87 Tag top of cement at 3765' approx. Drill out cement. Test well to 1500# for 10 min. No decrease in pressure.

4/12/87 Put on pump to test lower Seven Rivers formation. (Perforations 4095' - 4100').

ACCEPTED FOR RECORD  
MAY 19 1987  
SJS  
CARLSBAD, NEW MEXICO

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

SIGNED Frank A. Murga TITLE Operator DATE May 5, 1987  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

no  
2 A San Miguel Gas SR

RECEIVED  
MAY 21 1987  
OCD  
HOBBS OFFICE