

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI
(Other instruction on re-
verse side)

Form approved. *Page 2*
Budget Bureau No. 1004-0135
Expires August 31, 1985

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	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <i>Union Oil Company of California</i>	8. FARM OR LEASE NAME <i>North Maduro Fed. Unit</i>
3. ADDRESS OF OPERATOR <i>P.O. Box 671 - Midland, Texas 79702</i>	9. WELL NO. <i>1</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>Unit H 2310' FNL #660' FEL of Sec. 20</i>	10. FIELD AND POOL, OR WILDCAT <i>Gem Morrow</i>
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>3620.6' GR</i>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>Sec. 20 T-19-S, R-33-E</i>
	12. COUNTY OR PARISH <i>Lea</i>
	13. STATE <i>NM</i>

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 COMPLETION	<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"/>		<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)	<input checked="" type="checkbox"/> <i>Perf Middle Morrow</i>		<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.) *

2-23-89 SITP 500/13. BLED WELL TO 0 PSI IN 21 MINS ON 22/64" CK. FLWD WELL 8 HRS TO ATM W/SMALL BLOW. SWI. SOON.

2-24-89 SITP 500/16. BLED TBG TO 0* FOR 20 MIN ON 20/64" CK. FLWD WELL FOR 6 HRS. SLIGHT BLOW. SWI. SOON.

2-25-89 SITP 500/16. BLED TO 0*. HOWCO ACIDIZE MIDDLE MORROW PERFS 13,252-435' ON 2-3/8" TBG W/6000 GAL 7-1/2% HCL & 6000 3% HF 12% HCL & 7600 GAL CLA FIX II W/200 1.1 SG BS'S TO DIVERT IN T STGS (750 GAL 7-1/2% HCL, 1000 GAL 3% HF 12% HCL, 750 GAL 7-1/2" HCL, 1000 GAL CLA FIX II W/BS'S PER STG). DISPLACE TO BTM PERF W/2415 GAL CLA FIX II @ 4.8 BPM & 8100-8900#. POOM-FAIR BALL ACTION. TLTR 461 BBL. ISIP 4000 (5) 1500 (10) 1000 (15) 800. OPEN WELL W/250# TO TEST TANK. BLED TO 0* IN 3 MINS. RAN 1" COILED TBG JETTING W/300-400 SCF N2 TO 9500'. JET FOR 7-3/4 HRS & WELL KICKED OFF @ 8:45 PM 2-25-89. POH W/COILED TBG. FLWD WELL F/9 HRS ON 18-12/64" CK W/1300-2850# FTP. TR 298 OF 461 BLW.

2-26-89 FLWD 1.2 MMCFD ON 12/64" CK W/3450# FTP/7 HRS. MADE 3 BBL COND & 5 BW/7 HRS.

2-27-89 FLWD 1.4 MMCFD + 16 BBL COND & 57 BW/24 ON 12/64" CK W/3750# FTP. TR 360 OF 461 BLW.

2-28-89 FLWD 1.5 MMCFD + 11 BBL COND & 12 BW/24 ON 12/64" CK W/3722# FTP FRM MIDDLE MORROW. PREV TEST: SI LWR MORROW (WATERED OUT). OFF REPORT.

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

SIGNED

Jeffrey J. Tokarsky

TITLE

Drilling Engineer

DATE

3-1-89

(This space for Federal or State office use)

APPROVED BY

DAVID R. GLASS

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side