

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

Budget Bureau No. 1004-1
Expires August 31, 1985
5. LEASE DESIGNATION AND SERIAL

NM-57285

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

STIVASON FEDERAL

9. WELL NO.

4

10. FIELD AND POOL OR WILDCAT

Pearl Queen

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Section 28, T19S-R34E

14. PERMIT NO.

15. ELEVATIONS (Show whether DE, RT, GR, etc.)

GL 3701.2

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:

TEST WATER SHUT OFF

FRACURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT OFF

FRACURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Setting Surface & Production Casing

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATION: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting 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.)*

- 1) Spud well @ 1:45 p.m., June 13, 1989.
- 2) Drilled to 1335', ran 29 jts of 8 5/8" - 23# casing to 1330'.
- 3) Cemented w/ 450 sks Halliburton "Lite", 1/4 Flocele, 2% CaCl & 200 sks Halliburton "Premium Plus", 2% CaCl & circulate 90 sks. Plug down @ 12:15 a.m.
- 4) Drilled to 5125'. Schlumberger log shows good Queen development.
- 5) Ran 5 1/2" casing to 5125'.
- 6) Cemented w/ 550 sks of Halliburton "Premium Plus", 1000 gallons of mud flush ahead of cement. Circulate cement to a BHP of 850#. Top of cement at approximately 2600'.
- 7) Shut Down. Waiting on cement and completion of log analysis.
- 8) Completion Report to be filed after perforating and fracturing.
- 9) Certified copy of deviation surveys enclosed as "Exhibit A".

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

SIGNED

James E. McCallister

TITLE

Vice President Administration

DATE

6-28-89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED
JUL 13 1989
OCD
HOBBS OFFICE