

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN THIS STATE
OTHER INSTRUCTIONS
VERSE SIDE

LEASE DESIGNATION AND SERIAL

NM-32591

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. WELL OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> WELL <input type="checkbox"/> WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME North Maduro Federal Unit
2. NAME OF OPERATOR Union Oil Company of California	8. FARM OR LEASE NAME North Maduro Federal Unit
3. ADDRESS OF OPERATOR P. O. Box 671 - Midland, Texas 79702	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below) At surface 1800' FSL & 2060' FWL of Section 20 and A	10. FIELD AND POOL OR WILDCAT Gem Morrow Gas
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 20, T-19-S, R-33-E	12. COUNTY OR PARISH 13. STATE Lea NM
14. PERMIT NO. 3606' GR	

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>Completion work</u> <input checked="" type="checkbox"/>	
(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.) *

12/17 MI RU COBRA WELL SERVICE. NU BOP. RIH W/4-3/4" BIT, 6 3-1/2" DC'S, PICKING UP 2-7/8" TBG TO 6325', INCOMP.

12-8: RIH W/4-3/4" BIT TO TOC @ 10,188'. PRES TSTD BOP TO 1500 PSI, OK. DRLD CMT FRM 10,188-10,311'.

12-9: DRLD CMT FRM 10,311' TO DV TOOL @ 10,480'. DRLD DV TOOL, TIH TO TOC @ 13,369'. TSTD 5-1/2" CSG TO 1500 PSI, OK. DRLD CMT FRM 13,369-13,480', INCOMP. SDON.

12/14 R&L 440 JTS (13,534') 2-7/8" 6.5# N-80 "AB" MODIFIED NEW TBG @ 13,556'. ALL TBG & EQUIP TSTD TO 5000 PSI. DISPLACED TBG W/N2, LATCHED INTO "WB" PKR @ 13,556'. ND BOP, NU TREE, LAND TBG.

12-15 BLED N2 PRES OFF TBG. DROP BAR WHICH PERFORATED 5-1/2" CSG W/4" TBG CONVEYED VANN GUNS @ 13,638-13,642' (16 TOTAL HOLES). GAS TO SURF IN 2 HRS - TSTM. FISH DETONATING BAR. DROP GUNS OFF TBG. SWI. SDON.

12-16 SITP 0/12. ACIDIZE LWR MORROW PERFS 13,638-42' W/750 GAL 7/5% NE, FE & LST HCL + 20-1.3 SG BS TO DIVERT @ 3.5 BPM & 5300#. ISIP 5000 (15) O. HAD 500# BALL ACTION. TLR 116 BBL. SWBD 66 BW/6 HRS. F-LVL SURF-10,300'. NO GAS SHOW.

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

SIGNED Jeffery G. Tokarsky

TITLE Drilling Superintendent

DATE 12-18-89

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

RECEIVED

DEC 22 1989

ODD
HONORS OFFICE