

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

LEASE DESIGNATION AND SERIAL NO.

NM-56749

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Texaco Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

East Gem Morrow

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

Sec. 14, T19S, R33E

12. COUNTY OR PARISH 13. STATE

Lea

NM

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Manzano Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 2107, Roswell, New Mexico 88202-2107

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

2060' FSL & 1980' FWL

14. PERMIT NO.

30-025-30763

15. ELEVATIONS (Show whether DF, RT, GK, etc.)

3673' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Running casing

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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 and 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.)*

Ran 320 jts. (13,682.89') of 5-1/2" - 20# and 23# N80 and S95-LT&C:

4213.41' - 23#- N80-LT&C

5417.99' - 20# N80-LT&C

3184.10' - 23# N80-LT&C

867.49' - 23# S95-LT&C

Set @ 13,650' KB. Used FC & FS + 26 centri and 15 scratchers.

Pumped 500 gal mud flush + 650 sks Class H 50/50 poz w/5# salt + 0.4% Halid 22-A.

Plug down 10:00 p.m. 02-03-90. Had good circl. throughout. Tested plug to 3000 psi.

OK.

ACCEPTED FOR RECORD

Adm

MAR 5 1990

CARLSBAD, NEW MEXICO

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

SIGNED

Lucille Webb

TITLE Production Clerk

DATE 02-10-90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side