

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-56749
2. Name of Operator Manzano Oil Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 2107, Roswell, NM 88202-2107 (505) 623-1996	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FSL & 2100' FEL Section 14, T19S, R33E Unit 5	8. Well Name and No. Texaco Federal 4
	9. API Well No. 30-025-32092
	10. Field and Pool, or Exploratory Area Undes. E. Gem Delaware
	11. County or Parish, State Lea County, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other <u>Perforating, Acidizing & Fracking</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

1. 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.)*

10/30/93 Set cement retainer @ 7237'. Pump 150 sks Class H w/0.5% CF-14. Squeeze to 2600 psi.

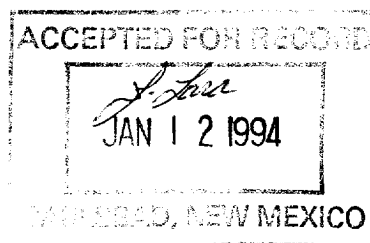
11/02/93 Perf well as follows: 7149,53,7163,67,7174,80,85,7192,95,99,7205,07,7412,15 19. Acidized well w/1000 gal 10% NEFE acid.

11/04/93 Made 1 run/hr next 5 hrs. Rec 10.5 bbls - 6 B0 + 4.5 BW.

11/06/93 Frac w/10,500 gal 35# Borate System w/16k# 16/30 Ottawa Sd + 10k# 16/30 RC sand.

11/10/93 TIH w/open ended mud anchor, 6 jts tbg - TA and 221 jts of 2-7/8" N80 6.5# EUE tbg. End of Mud Anchor @ 7114.55'.

11/15/93 Pumped 25 B0 + 456 BW in 20 hrs.



I hereby certify that the foregoing is true and correct

Signed [Signature] Title Engineering Technician Date 11/23/93

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: