

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
Marathon Oil Company

3. Address and Telephone No.
P.O. Box 552 Midland, Tx. 79702 915-682-1626

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
UNIT LETTER J 1980' FSL & 1980' FEL
SEC 12, T 20 S, R 34 E

5. Lease Designation and Serial No.
NM 01747

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
LEA UNIT

8. Well Name and No.
LEA UNIT #5

9. API Well No.
30-025-02429

10. Field and Pool, or Exploratory Area
LEA Bone Spring

11. County or Parish, State
LEA CO., N. M.

12. 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 checked="" type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other RE OPEN LOWER BONE SPRING
	<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 Completion or Recompletion Report and Log.)

13. 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 c give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

WORKOVER OPERATIONS WERE RECENTLY COMPLETED ON THIS WELL. THE WORK IS SUMMARIZED BELOW:
MIRU PU. ND WELLHEAD. NU BOP. POOH W/TBG. TESTED BLIND & PIPE FIAMS. SET RBP @ 6310'. SPOTTED 200# SAND ON RBP. SET CMT RETAINER @ 9113'. SQZ CSG LEAKS 6310-6113' W/200 SX CLASS "C". SQZD TO 2300#. G IN HOLE W/BIT. TAG CMT @ 6090'. DRILLED OUT CMT AND RETAINER. TESTED SQZ TO 1000 PSI. TEST OK. POOH W RBP. RIH W/RETRIEVING HEAD TO RBP @ 9401'. COULD NOT LATCH ONTO RBP. FISHED AND WASHED OVER RBP. POOH' RBP. RIH W/NEW RBP. SET @ 10,288' W/PKR SWINGING @ 10,236'SPOTTED 300 GAL 15% HCL ACROSS LOWER BONE SPRING. ACIDIZED 10,220-10,234' W/1400 GAL 15% HCL USING 40 BS. RESET RBP @ 9695'. SET PKR 9485'. ACIDIZE BONE SPRING 9600-9614' W/1400 GAL 15% HCL USING 40 BS. RESET RBP @ 10288'. SET PKR @ 9485'. SWABBED WELL SQZD 110 GAL SCALE INHIBITOR FOLLOWED BY 15 BBLS 2% KCL INTO LOWER BONE SPRING. SQZD 110 GAL SCAL INHIBITOR FOLLOWED BY 75 BBLS 2% KCL INTO UPPER BONE SPRING PERFS. POOH W/PKR & PLUG. WIH W/2 7/8" PRC STRING. TBG ANCHOR @ 9519'. SN@ 10,264'. ND BO NU WELLHEAD. INSTALLED RODS & 1 1/4" PUMP. PLACED WEI ON TEST. RD PU. CLEANED LOCATION.
LAST TEST: 40 BOPD 46 MCFPD 134 BWPD. PRIOR TO WORK, WELL SI FOR CSG LEAKS.

S

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

Signed Thomas M. Price THOMAS M. PRICE

Title ADVANCED ENGINEERING TECH.

Date 8-3-93

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

ACCEPTED FOR RECORD

J. Lara
29 1993

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statement or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

CARLSBAD, NEW MEXICO

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