

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions
on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 01747

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

- - - -

7. UNIT AGREEMENT NAME

Lea Unit

8. FARM OR LEASE NAME

Lea Unit

9. WELL NO.

5

10. FIELD AND POOL, OR WELL GROUP

Lea Devonian

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

Sec. 12-20S-34E

14. PERMIT NO.

Current

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

DF 3682'

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

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 COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Aband. Penn & recomplete

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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.)*

Spotted 50 sacks "H" cement with additives 0.1% D-13, 0.4% D-65, 0.3 gal. D-73 over Penn perf. @ 12,911 to 12,960'. Squeezed perfs to 6000 psi. RTTS packer set @ 12,250'. WOC 24 hrs. Tagged top of cement @ 12,738'. Drilled cement to 12,970'. Pressured up on casing 2000 psi for 15 minutes, held O.K.

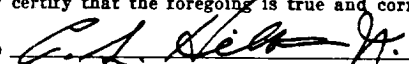
Ran 2-7/8" tubing with Otis MH packer and 10 MACCO gas lift valves. Packer set @ 6318'.

On 4 hr. test well produced at a daily rate of 204 BOPD and 3132 BOPD by gas lift.

Prior to workover to abandon Penn gas perfs. and run 2-7/8" tbgs. Devonian was producing 26 BOPD and 206 BOPD.

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

SIGNED



TITLE Area Superintendent

DATE 5-22-73

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE