

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLES
(Other instructions on
reverse side)

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

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 71-046164-A
2. NAME OF OPERATOR Amerada Hess Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Drawer D, Monument, New Mexico 88265		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 2310' FWL		8. FARM OR LEASE NAME H. W. Andrews
14. PERMIT NO.		9. WELL NO. 7
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3584' DF		10. FIELD AND POOL, OR WILDCAT Eumont Yates Seven Rivers Queen
		11. SEC., T., R., OR BLK. AND SURVEY OR AREA Sec. 23, T20S, R36E
		12. COUNTY OR PARISH Lea
		13. STATE N.M.

16. 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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input 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.) * January 9, 1985 to January 22, 1985 - Backed off rods & stripped out rods & tbgs. Recovered pump stuck in jt. of 2" Reg. tbgs. Ran 4" retrievable bridge plug & 4" pkr. on 4 jts. 2" Reg. tbgs. & 120 jts. 2-3/8" tbgs. & set bridge plug in 4" liner at 3852'. Set pkr. at 3800' & acidized Eumont Yates Seven Rivers Queen zone thru 4" liner perf. fr. 3818' to 3852' w/2500 gal. 15% NE acid using rock salt as diverter. Swab tested. Released pkr. & re-set bridge plug in 4" liner at 3777'. Pulled tbgs. & 4" pkr. & ran 5-1/2" Baker pkr. on 117 jts. 2-3/8" tbgs. & set pkr. at 3652'. Acidized Eumont Yates Seven Rivers Queen zone thru 5-1/2" csg. perf. fr. 3690' to 3717' & 4" liner perf. fr. 3717' to 3743' w/2500 gal. 15% NE acid using rock salt as diverter. Swab tested. Released 4" retrievable bridge plug & trip out w/tbgs., 5-1/2" pkr. & 4" retrievable bridge plug. Ran 5-1/2" retrievable bridge plug & 5-1/2" pkr. on 2-3/8" tbgs. & set bridge plug in 5-1/2" csg. at 3652'. Set pkr. at 3497'. Acidized Eumont Yates Seven Rivers Queen zone thru 5-1/2" csg. perf. fr. 3535' to 3585' w/2000 gal. 15% NE acid using rock salt as diverter. Swab tested. Released pkr. & bridge plug & re-set bridge plug at 3497' & set pkr. at 3189'. Acidized Eumont Yates Seven Rivers Queen zone thru 5-1/2" csg. perf. fr. 3285' to 3370' w/2500 gal. 15% NE acid using rock salt as diverter. Swab tested. Released pkr. & bridge plug & re-set bridge plug at 3189' & set pkr. at 2937'. Acidized Eumont Yates Seven Rivers Queen zone thru 5-1/2" csg. perf. fr. 3025' to 3065' w/2000 gal. 15% NE acid using rock salt as diverter. Swab tested. Trip out w/tbgs., pkr. & bridge plug. Re-ran 4 jts. 2" Reg. tbgs. & 119 jts. 2-3/8" EUE tbgs. set at 3823'. Re-ran pump & rods and resumed pumping.

No test reported.

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

SIGNED E. B. Fisher

TITLE Supv. Adm. Ser.

DATE 1-22-85

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JAN 24 1985

*See Instructions on Reverse Side

RECEIVED

JAN 25 1985 .

O.C.D.
HOBBS OFFICE