

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other Instructions re-
verse 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.)

N.M. OIL CONS. COMMISS. - NM
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

5. CASE DESIGNATION AND SERIAL NO. NM-02814 - 8910086960	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME NM-029141	
7. UNIT AGREEMENT NAME EAST EUMONT UNIT	
8. FARM OR LEASE NAME	
9. WELL NO. 18	
10. FIELD AND POOL, OR WILDCAT EUMONT YATES 7 RVR QN	
11. SEC, T, R, M, OR BLK AND SURVEY OR AREA SEC 4 T19S R37E	
12. COUNTY OR PARISH LEA	13. STATE NM

OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>	INJECTION
2. NAME OF OPERATOR OXY USA INC.			
3. ADDRESS OF OPERATOR P.O. BOX 50250 MIDLAND, TX 79710			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1837 FNL 1650 FEL SW-NE			

14. PERMIT NO. 300250554700S01	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3691
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Check Appropriate Box To Indicate Nature of Notices, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☒
REPAIR WELL ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☒

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☒
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☒

(Other) CONVERT TO INJECTION

CONVERT TO INJECTION

(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 five 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.)*

TD - 4025' PBTD - 3940' PERFS - 3753' - 3916'

MIRU PU 11/16/93, NDWH, NUBOP, RIH & TAG @ 3765'. DO TO 3970', CHC. RIH & SET CIBP @ 3960'. PERF ADD'L INTERVAL @ 3753-74, 83-89, 3794-3812, 32-42, 90-3897'. DUMP 2SX CMT ON TOP OF CIBP. ACIDIZE W/ 5000GAL 15% NEFE HCL ACID. POOH, RIH W/ GUIB G-6 & 2-3/8" TBG & SET PKR @ 3674', NDBOP, NUWH, CIRC W/ PKR FLUID, TEST CSG TO 600#, RDPV 11/24/93. PUT WELL ON INJECTION 3/21/94 @ 49BWPD @ 700#.

RECEIVED
JUN 10 10 40 AM '94
CARLO
AREA HEADQUARTERS

J. Lara

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

SIGNED

[Signature]

TITLE

REGULATORY ANALYST

DATE

6/7/94

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side