

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-27260

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
N/A

7. Lease Name or Unit Agreement Name
Foster Ranch

8. Well No.
1

9. Pool name or Wildcat
Foster San Andres

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'
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
Devon Energy Corporation

3. Address of Operator
1500 Mid America Tower, OKC, OK 73102

4. Well Location
Unit Letter A : 660 Feet From The North Line and 330 Feet From The East Line
Section 6 Township 19S Range 39E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3395' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Pulled well. Ran bit and scraper to 4515 ft. Had scale across zone. TOOH.
2. Perf'd 4422-4430, 3 SPF, 24 holes. TIH w/RBP and pkr. Set RBP @ 4460' and pkr at 4351 ft. Loaded backside, put 500 psi on annulus. Acidized zone w/1000 gals 15% NeFe acid. Swab tested well for two days. No recovery except spent acid. Swabbed dry.
3. Released pkr. Pulled RBP and Pkr. TIH w/4479 ft. 2 3/8" tbg. Ran rods and pump. Hung well on. Grayburg was non-productive. Returned well to production as a San Andres well.
4. Had a high fluid level prior to workover. Removal of scale increased fluid level even more. Installed larger pumping unit to pump well down.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE J.M. Duckworth TITLE District Engineer DATE 3/20/89

TYPE OR PRINT NAME J.M. Duckworth TELEPHONE NO. (405) 235-3611

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAR 21 1989

RECEIVED

MAR 21 1989

**OCD
HOBBS OFFICE**