

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-01.00
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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
Nearburg Producing Company

3. ADDRESS OF OPERATOR
P.O. Box 823085, Dallas, TX 75382-3085

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
660' FSL & 760' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3685.4' GR

5. LEASE DESIGNATION AND SERIAL NO.
NM-28880

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Rett Federal Com

9. WELL NO.
1-Y

10. FIELD AND POOL, OR WILDCAT
South Lea Bone Spring

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 23-T20S-R34E

12. COUNTY OR PARISH
Lea

13. STATE
NM

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 type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Activity	

(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.)*

01/02/91: Rigged up work over rig. Blew well down. RU Swab and attempt to re-establish production from the Morrow perforations from 13,041-53' to 13,161-69'. Well swabbed down to SN with very little fluid entry & a slight gas blow. SI for build-up.

01/03/91: This AM SITP 250#. Blew down in 5 minutes. Does not appear Morrow will produce into current pipeline pressure. Attempted to pull packer. Would not release. Released on-off tool, TOOH.

01/04/91: Set CIBP @ 10,600'.

01/05-20/91: Swab testing Bone Spring.

01/21/91: Set RBP @ 9,759'.

01/22/91: Ran mud anchor, SN and 308 jts 2-3/8" N-80 tbg. SN @ 9,670'.

01/23/91: Ran pump and 3/4" & 7/8" rods. Put well on pump. (Bone Spring perfs: 9,104' to 9,117' and 9,585' to 9,630').

RECEIVED
FEB 13 11 21 AM '91
OASIS
AREA

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

SIGNED Penny D. Schoofcraft

TITLE Engr. & Prod. Secretary

DATE 01/25/91

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE Ab

DATE _____

*See Instructions on Reverse Side