

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR
Other (Instructi
Reverse side)

CATE
00 17

LEASE DESIGNATION AND SERIAL NO.
LC-031670B

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.)

IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

James McKee

8. FARM OR LEASE NAME

9. WELL NO.

#59

10. FIELD AND POOL, OR WILDCAT

Warren McKee

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

Sec. 20, T20S, R38E

12. COUNTY OR PARISH 13. STATE

Lea NM

1. OIL WELL ☐ GAS WELL ☐ OTHER Injection

2. NAME OF OPERATOR

Conoco Inc.

3. ADDRESS OF OPERATOR

P.O. Box 460 - Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below)
At surface

Unit M

660' FSL + FWL

14. PERMIT NO.

30-025-0783A

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

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) Clean-out, stimulate & test

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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 perti-
nent to this work.)

Clean-out to TD (9195'). Set pki @ 8900'. Stimulate as follows:
Pumped 25 Bbl 15% HCL-NE-FE, 3 Bbl KCL pad, 50 Bbl .3%
Dichlor-S, 3 Bbl KCL pad, 50 Bbl 15% HCL-NE-FE, 3 Bbl KCL pad
50 Bbl .3% Dichlor S, 3 Bbl KCL pad, repeat. P.O.D. w/ 2 3/8"
workstring & pki. 6 1/4" w/ lok-set pki, & 284 jts 2 3/8 P.C. tag.
Set pki @ 8836. Circulate 200 Bbl pki fluid. Test csg. to
500# for 15 min. Held. Chart attached.
Place well on injection

ACCEPTED FOR RECORD

RECEIVED

RECEIVED

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

SIGNED

H.A. Ingram

TITLE

Conservation Coordinator

DATE

4/4/90

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side