

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN THIS MANNER
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.NM 38473
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Laguna Petroleum Corporation	8. FARM OR LEASE NAME Federal # 7
3. ADDRESS OF OPERATOR P.O. Drawer 2758, Midland, Texas 79702-2758	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 990' FWL, D, Sec. 7, T-21S, 38E	10. FIELD AND POOL, OR WILDCAT Wanta (ABO), Drinkard)
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA 7-21S-38E	12. COUNTY OR PARISH Lea
13. STATE New Mexico	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3534.8 GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

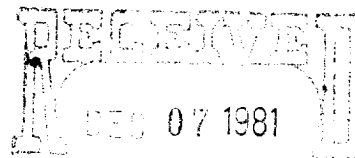
SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<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.)*

11/10/81 Drilled out DV tool-drilled to total depth 7451' PBTD
11/11/81 Ran GR-CBL log from 7451' to 3500', perf ABO formation 1 JSPF @ 7419,18,17, 7396',91,84,81,47,45,25,24,15,10,7301,7281,63,7219,7151'.
11/12/81 Acidized down 2 3/8" tbg w/4,000 gals 15% NEFE acid, recovering load.
11/13/81 thru 11/17/81 Recovering load.
11/18/81 Acidized w/8000 gals MOD 202 20% acid, recovering load.
11/19/81 thru 11/23/81 Recovering load
11/24/81 Load recovered, put well on pump.

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

SIGNED Jim McAninch CHAPMAN
(This space for Federal or State office use)TITLE Completion Foreman DATE 12/2/81APPROVED BY DEC 3 1981
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side