

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP*
(Other instruction
verse side)

DATE

Approved
Budget Bureau No. 1004-1
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

NM-50918

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NONE

7. UNIT AGREEMENT NAME

NONE

8. FARM OR LEASE NAME

FEDERAL "22"

9. WELL NO.

#1

10. FIELD AND POOL OR WILDCAT

OJO CHISO MORROW

11. SEC., T., R., M., OR BLE. AND
SURVEY OR AREA

SEC 22-22S-34E

12. COUNTY OR PARISH; 13. STATE

LEA

NEW MEXICO

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. WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

APACHE CORPORATION

3. ADDRESS OF OPERATOR

7666 E. 61ST STREET, SUTIE #500, TULSA, OK 74133

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

1980' FSL & 990' FEL SE/4

14. PERMIT NO.

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

3436' GR

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRAC TUBE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLUG

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRAC TUBE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) 7-5/8" INTERMEDIATE CASING

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. HAS RIDE PROPOSED OR COMPLETED OPERATIONS? (Don't 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 per-
tinent to this work.)

SET 7-5/8" 30# P-110 LTC CASING AT 11,300'. CEMENTED WITH 395 SX HT LITE (W/9# SALT).
TAIL IN WITH 500 SX CLASS "H" (W/2/10% HR-5 + 5/10% FCR-3 + 6# SALT). DID NOT BUMP
PLUG. TEST CASING TO 1500# FOR 30 MINS, NO PRESSURE BLEED OFF, TESTED OK. ESTIMATED
TOP OF CEMENT AT 8,300'. TOTAL WOC TIME WAS 36.5 HOURS.

ACCEPTED FOR RECORD

MAY 19 1987

SJS
CARLSBAD, NEW MEXICO

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

SIGNED

TITLE DRILLING ENGINEER

DATE 5/11/87

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED
MAY 21 1987
OCD
HOBBS OFFICE