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# NEW MEXICO OIL CONSERVATION COMMISSION

Dec 7 12 03 PM '65

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
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5. State Oil & Gas Lease No.	E-229
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## 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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	South Wilson Deep Unit
3. Address of Operator	8. Form or Lease Name
P. O. Box 1920, Hobbs, New Mexico	9. Well No.
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER L 1980 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 23 TOWNSHIP 21S RANGE 34E NMPM.	South Pennsylvanian Gas
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3717' GR	Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING CPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Selectively retreat w/acid

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

- 11-11-65 Spotted 2 bbl. M.A. over perfs. 12,847-12,895'. Reset packer @ 12,840'. Acidized to perfs. w/1000 gals. M.A. Max. Press. 4350#, Min. 3400# @ 1/2 BPM. Inst. SIP 4300#, 11-14-65 5 mins. SIP 3800#. Pressured annulus to 1500# before treatment. 1/3 thru treatment pressure on annulus slowly increased to 2300# and remained thru last 1/2 of treatment. Open 12/64" choke flowed 25 BLO in 3 hrs. w/csg on vacuum. Well died w/tubing full of inverted mud. Released packer circ. hole 3 hours to remove gas pockets. Reset packer @ 12,810' and displaced inverted mud in tubing, opened on 3/4" choke. Flowed perfs. 12,826-32', 12847-52' and 12892-95' 51 bbl. dist. in 4hrs., no gas, 25# Tbg Press.
- 11-15-65 Acidized Morrow perfs. 12,826-12,895' w/1000 gals. mud acid preceded by 20 bbl. Dist. w/10 gal. Dowell Mud Ban. Max. Press. 4750#, Min. Press. 3900# @ 1.2 BPM. Inst. SIP 4750#, 5 mins. SIP 4250#. Annulus Press held at 1500#. Opened and flowed 15 BLO in 1 hr., ran over small stream 8 hrs. Swabbed perfs. 12,826-12,895', load oil and acid water for 9 hrs. w/show of gas, 500' FIH. Swabbed 100% AW last 2 hrs.
- 11-16-65 Acidized perfs. 12,750-12,784' w/1000 gals M.A. Max. Press. 5150#, Min. Press. 4200#, Avg Inj. Press. .75 BPM. Final rate 2 BPM, Inst SIP 5000#, 5 mins. SIP 4900#. Opened on 1/2" choke. Flowed 3 BLO in 30 min. & died. Swabbed perfs. 12,750-12,784' 74 BLO & 10 BAW in 7 hrs. w/show of gas TSTM. Swabbed down to 12,500' w/300' FIH.
- (This Item No. 17 continued on sheet #2.)

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

SIGNED [Signature] TITLE Superintendent DATE 12-7-65

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

Orig&2cc: CCC Hobbs, cc: State Land Office, cc: Regional Office, cc: Partners, cc: file