

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYCOPY TO O. C. S.
SUBMIT IN TRIPPLICATE*
(Other instructions reverse side)Form approved.
Budget Bureau No. 42 R1424.

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-04229-B
2. NAME OF OPERATOR Cleary Petroleum Corporation	6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---
3. ADDRESS OF OPERATOR P. O. Drawer 2358, Midland, Tx. 79702	7. UNIT AGREEMENT NAME ---
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FWL & 4650' FSL	8. FARM OR LEASE NAME New Mexico Federal "F" Comm
14. PERMIT NO. Letter dated 6-26-78	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3668' GR	10. FIELD AND POOL, OR WILDCAT Undesignated
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 5, T-21-S, R-32-E
	12. COUNTY OR PARISH Lea
	13. STATE N. M.

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 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) Spud date, Surf & Inter Csg <input checked="" 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.)*

7-20-78 Spudded 17½" hole @ 8:00 PM.

7-21-78 Drld 17½" hole to 500'. RU csg tools. Ran 12 jts (496') 13 3/8", 54.5#, K55, STC csg set @ 496'. Cmt'd down 13 3/8" csg w/300 sx Class "C" containing 4% gel, ½ lb/sk Flocele, & 2% CaCl₂ followed by 300 sx Class "C" containing ½ lb/sk Flocele & 2% CaCl₂. Bumped plug w/500 PSIG @ 5:45 PM. Circ'd 200 sx cmt. Cut-off & welded-on csg hd. NU BOP stack. WOC 26 hrs.

7-22-78 Tested BOP, choke manifold & csg to 1000 PSIG for 30" ok.

8-3-78 Drld 12¼" hole to 5181' & circ'd clean. Ran GR-N log from 3600' to 496'. Ran Caliper Survey.

8-4-78 Obtained sidewall cores in salt section for USGS. Ran 125 jts (5193') 9 5/8", 53.5#, N80, LTC csg set @ 5176' w/DV tool set @ 3093'. Cmt'd 1st stage w/400 sx Howcolite containing 5#/sk Gilsonite & ½#/sk Flocele followed by 300 sx Class "C" containing 2% CaCl₂ & ¼#/sk Flocele. Plug down @ 6:30 PM. Opened DV tool. Circ'd 125 sx cmt from 1st stage. Cmt'd 2nd stage w/1525 sx Howcolite containing 13.5#/sk salt & ¼#/sk Flocele (con't on additional page)

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

SIGNED

TITLE

District Production Mgr.

DATE 9-14-78

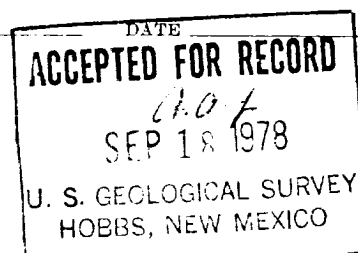
(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side



- 8-4-78 followed by 100 sx Class "C" containing 2% CaCl_2 & $\frac{1}{4}$ #/sk Flocele.
(con't) Closed DV tool @ 11:50 PM. Circ'd 400 sx cmt to surf. WOC 29 hrs.
- 8-5-78 NU & tested blind rams to 2000 PSIG ok.
- 8-6-78 TIH to DV tool & tested pipe rams to 2000 PSIG ok. Drld plug, DV tool,
& TIH to FC. Tested csg to 2000 PSIG ok.
- 8-18-78 Tested BOP as follows: Rams 5000 psi, Blind Rams 5000 psi, Hydril 1500
psi, Choke line 5000 psi, choke manifold 5000 psi, Kelly cock 3500 psi,
Safety valve 3500 psi, & dart valve 5000 psi.