

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 19620

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Triste Draw Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Diamondtail Bone Spring

11. SEC., T., E., M., OR BLK. AND
SURVEY OR AREA

Sec. 11, T23S, R32E

12. COUNTY OR PARISH 13. STATE

Lea,

NM

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 ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Upland Production Company

3. ADDRESS OF OPERATOR

P.O. Box 481, Midland, Tx. 79702

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

At surface

660' FSL & 1980' FWL

14. PERMIT NO.

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

3728' GL

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)

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 pertinent to this work.) *

(1) Correct lease name on last Sundry Notice from Triste Draw Gulf Federal to Triste Draw Federal.

(2) 4-25-86 Took well operations over from Chevron.

4-26-86 Perforate Bone Spring formation from 11,406' to 11,421' w/2 shots per foot.

4-28-86 Acidized 11,366' to 11,464' or 3 old perfs 11,401, 11,425 & 11,434 along with new perfs with 2500 gallons of 15% HCL.

4-29-86 to 5-5-86 Swabbed oil, water & gas. Prepare to frac.

5-8-86 Fracture treated same perfs as acidized with 89,000# 20/40 sand, 12,000# Bauxite, 1248 Bbl gelled Kcl water & 100 tons of CO2.

5-9-86 to 5-16-86 Flowed back frac. Well died. Began swabbing oil, gas & water.

6-4-86 to 6-7-86 Installed pumping equipment and began pumping.

6-8-86 to 8-14-86 well tested non-commercial on pump.

(3) Prepare to P&A. Awaiting instructions.

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

SIGNED

Michael Hedrick

TITLE Vice Pres.

DATE 8-21-86

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

PRO

AUG 27 1986

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO

RECEIVED

AUG 29 1986

U.S.D.
HONORARY OFFICIAL