

RECEIVED
SEP 26 9 19 AM 1994UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N.M. OIL CONS. COMMISSION
P.O. BOX 1980
DOBBS, NEW MEXICO 88240FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

MERIDIAN OIL INC.

3. Address and Telephone No.

P.O. Box 51810, Midland, TX 79710-1810 915-688-6943

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SEC. 19, T23S, R37E
660' FNL & 660' FWL

Unit D

5. Lease Designation and Serial No.

NM 2244

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

HUGHES B-6 # 11

9. API Well No.

30-025-27258

10. Field and Pool, or exploratory Area

JALMAT YATES (GAS)

11. County or Parish, State

LEA NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒
- Notice of Intent
-
- ☐
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- ☐
- Abandonment
-
- ☒
- Recompletion
-
- ☐
- Plugging Back
-
- ☐
- Casing Repair
-
- ☐
- Altering Casing
-
- ☐
- Other
- Recomplete from Langlie
-
- Mattix to Jalmat Yates (Gas)
-
- ☐
- Change of Plans
-
- ☐
- New Construction
-
- ☐
- Non-Routine Fracturing
-
- ☐
- Water Shut-Off
-
- ☐
- Conversion to Injection
-
- ☐
- Dispose Water
-
- (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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. MIRU. TEST CIBP TO 4000 PSI. NU BOP.
2. MIRU WIRELINE UNIT. RU PACK OFF ON TOP OF BOP. RIH W/PERF GUN AND PERF. 22 HOLES AS FOLLOWS: 2974'-3130'.
3. PU TREATING PACKER AND SN ON TBG. MIRU STIMULATION COMPANY. PICKLE TBG W/500 GLS 7 1/2% HCL. REVERSE OUT TBG. SPOT 200 GLS OF 7 1/2% HCL ACROSS PERS. PU TO 2950'. REVERSE SPOT ACID INTO TUBING. SET PACKER AT 2950'.
4. TEST SURF LINES TO 4200 PSI FOR 10 MINS. ACIDIZE YATES FORMATION W/1100 GLS OF 7 1/2% HCL AND 44 RCNBS.
5. RELEASE PACKER. RIH THROUGH PERS TO KNOCK BALLS OFF. POOH W/TBG.
6. RU TO FRACTURE STIMULATE W/50 Q CO2 DOWN 4 1/2" CSG. RU TWO STIMULATION VALVES W/A CHOKE AND BLEED OFF LINE BETWEEN FOR FLOW BACK. TEST ALL SURFACE LINES TO 4200 PSI FOR 10 MINS.
7. FRAC DOWN 4 1/2" CSG W/12000 GLS OF 35# LINEAR GEL, 97 TONS OF CO2 AND 123500 LBS OF 12/20 WHITE SAND.
8. MIRU FOAMED UNIT. RIH AND CLEAN WELL OUT TO PBTD. TURN OVER TO PRODUCTION.

RECEIVED FOR RECO.

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

Signed

Title REGULATORY ASSISTANT

Date 9/23/94

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: