

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. M. OIL CONSERVATION DIVISION
P. O. BOX 1980
HOBBS, NEW MEXICO 88248

FORM APPROVED
Bureau No. 1004-0135

Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of well <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC-030187
2. Name of Operator ARCH PETROLEUM, INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 10 Desta Dr. Suite 420E, Midland, TX 79705 (915) 685-1961	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1300' FNL, 560' FEL, SEC. 21, T23S, R37E	8. Well Name and No. C. E. LAMUNYON #51
	9. API Well No. 30-025-33133
	10. Field and Pool, or Exploratory Area TEAGUE BLINEBRY
	11. County or Parish, State LEA COUNTY, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

12 TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other COMPLETION	<input type="checkbox"/> 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 estimate 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.)*

Work performed 10/12/95 to 10/21/95.

Clean location, pipe valves to cellar, set anchors. Test casing to 3,000# for 15 mins. OK.

Perf 5-1/2" csg. 5404', 5407', 5414', 5426', 5448', 5462', 5506', 5532', 5564', 5579', 5601', 5617', 5630', 5647', 5663 5672', 5720', 5764', 5794', 5810', and 5837' with 4 (1/2") JHPF.

Break down perfs with 4200 gals. 15% NEFE acid. Frac Blinebry perfs down 5-1/2" csg. with 85,000 gals. of 35# gel with 50-65% CO2 foam and 251,000# of 16/30 mesh Ottawa sand. Frac at 40 BPM and max. pressure of 2540 psi. Flow back well up 5-1/2" casing and clean up frac sand. Well died. Run in hole with 2-3/8" production tubing. Swabbed on well and well started flowing.

Put well on production 10/22/95.

HOBBS INSPECTION OFFICE
ACCEPTED FOR RECORD
DATE 11-9-95
SIGNATURE URB

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

Signed Bakim Brooks

Title **PRODUCTION ANALYST**

Date 10/30/95

(This space for Federal or State office use)

Approved by _____

Title _____

Date _____

Conditions of approval, if any: