

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN
(Opposite
verse side)

Form approved
Budget Bureau No. 1004-1
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-067968

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ Water injection well

2. NAME OF OPERATOR

Sirgo-Collier, Inc.

3. ADDRESS OF OPERATOR

P. O. Box 3531, Midland, Texas 79702

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

At surface

Unit P, 330' FSL 660' FEL, Sec. 30, T24S, R38E

14. PERMIT NO.

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

3145' DF

7. UNIT AGREEMENT NAME

Unit Dollarhide Queen

8. FARM OR LEASE NAME

9. WELL NO.

18

10. FIELD AND POOL OR WILDCAT

Dollarhide Queen

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

Sec. 30, T24S, R38E

12. COUNTY OR PARISH

Lea

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) Set and test packer

(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.) *

2-11-88

Ran 116 joints 2-3/8" IPC tubing with Baker Model AD-1 packer. Packer set at 3520' and tubing at 3517'. Circulated packer fluid and tested packer at 500# for 30 minutes.

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

SIGNED

Amy L. Whitley

TITLE

Agent

DATE

March 7, 1988

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side