

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Conservation Division
1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do 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

ARCO Permian

3. Address and Telephone No.

P.O. Box 1089, Eunice, NM 88231

505-394-1649

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

Unit letter E, 1750 FNL & 1150 FWL
Section 13-25S-37E

5. Lease Designation and Serial No.

NM-0766

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

NMNM87877X

8. Well Name and No.

South Justis Unit 162
"E"

9. API Well No.

30-025-32083

10. Field and Pool, or exploratory Area

Justis Blinbry Tubb Drkd

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

- ☐ 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 give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

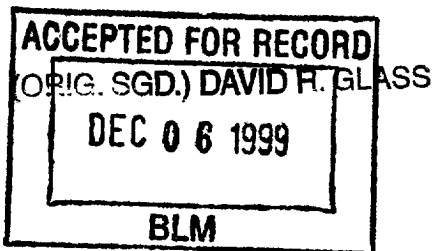
TD: 6050' KB: 3101' GL: 3087' PERFS: 5058-5933' 4-1/2" CSG @ 6050'

11/19/99: MIRUPU. POH w/tbg & pkr.

11/20/99: RIH w/bit & scaper. POH.

11/22/99: Perf 5058-5100, 7 shots. RIH w/pkr & tbg. Acidize all perfs w/2000 gals 15% NEFE.

11/23/99: POH w/pkr & tbg. RIH w/pkr & tbg. Set pkr @ 5015'. Circ pkr fluid. Run MIT.
Chart attached. Return to injection.



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

Signed

[Signature]

Title Administrative Assistant

Date 12/02/99

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

GWW

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