

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM- 0450247
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Sunoco Production Company	8. FARM OR LEASE NAME FEDERAL A
3. ADDRESS OF OPERATOR BOX 11, HOBBS, N. M. 88240	9. WELL NO. 4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT BOUGH DEVONIAN
14. PERMIT NO. 2300' FWL x 990' FWL Sec. 13 (Unit 2, NW/4 SW/4)	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 13-9-35 NMPM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4128' RD B	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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input checked="" type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)

Abandoned Bough Perm Perm (Bough C) zone by squeezing perfs 9550-60' w/ 60 SX cement @ 4750 #psi. (Per. but 90. SX drilled out to and set BP @ 11936' (PBD))

Bough Devonian: Perforated additional intervals 11916-23, 11928-35' w/ 2JSPF. Acidized w/ 1500 gal 15%. (2" tbg @ 11934 w/ PSA 11770.) Restored to production.

Prear - Flow 482 BO + 2BW - 24 hrs.

After - Flow 712 BO 24 hrs. TPF-200. Ch 2 7/64"

TD- 11991'

OC - 4-22-71

PBD- 11936'

Comp - 5-10-71

PMs - 11916-35'

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

SIGNED _____ TITLE AREA SUPERINTENDENT DATE 5-11-71

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

- 01 4-1845-1d
- 1-ACJr
- 1-SUSD
- H.

*See Instructions on Reverse Side

MAY 12 1971

U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

RECEIVED

MAY 13 1971

OIL CONSERVATION COMM.
HOBBS, N. M.