UNITED STATES SUBMIT IN TRIPLICA (Other Instructions of DEPARTMENT IF THE INTERIOR versus side)

Porto approved.
Budret Bureau No. +2-R1424
5 LEASE DESIGNATION AND SERIAL NO.

GEOLOGICAL SUR	VEY	LC 062004
SUNDRY NOTICES AND REPO	ORTS ON WELLS	IF INDIAN, ALLOTTEE OR TRABE " AME
1.	1	UNIT FOREFMENT NAME
OFF. X CAS OF OFFER OTHER 2. NAME OF OPEPATOR	8.	S.M.G.S.A.U.
Cities Service Oil Company		Tract 2
3. ADDRESS OF OPERATOR		WELL NO.
P. O. Box 1919 - Midland, Texas 79701 4. togation of well, (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		Maljamar (G-SA)
660' FNL & 660' FEL of SEC. 30- New Mexico	T17S-R33E, Lea Co.,	Sec. 30-T175-R33E
14. PELMIT NO. 15. ELEVATIONS (Show to	whether DF, RT, CR, etc.)	COUNTY OF FARISH 13. HEATE
4085' G R		Lea New Mexic
16. Check Appropriate Box To Inc	dicate Nature of Notice, Report, or Othe	r Data
NOTICE OF INTENTION TO:	SUBSEQUENT	REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT MULTIPLE COMPLETE	FRACTURE TREATMENT	ALIERING CASING
REPAIR WELL CHANGE PLANS	SHOOTING OR ACIDIZING (Other)	ABANDONMENT*
(Other) Run Liner & Perforate		nultiple completion on Well and Report and Log form.)
 DESCRIBE PROPOSED OF COMPLETED OPERATIONS - Clearly state all proposed work. If well is directionally druled, give subsument to this work. 		
	o workover this well in the f	ollowing manner:
1. MIRU workover unit, release packe		g.
 Rig up reverse unit and clean out Set an open hole inflatable mills 		dump 101 of spad
on top @ approx. 4305' - 4295'.	able plug & applox. 4005 and	dump to of salid
4. Hang and cement a 4" OD 11.34# K	-55 FJ Liner @ approx. 4295'	- 3945' w/63 sacks
 Drill and clean out to approx. 4: Perforate w/2-0.38" holes per for 4244"-4252". 		-
7. Run tubing with a packer set @ 30 gals. 15% HCl Acid.	664' and acidize perfs 4194'	- 4252' w/1500
8. Swab well in and place well on p	roduction.	
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18. I hereby certify that the foregoing is true and correct	Pogion Operation Harris	A 12 107
	Region Operation Manager	DATE August 13, 197
This space for Federal or State office use)		APPROVED
APPROVED BY . TIT CONDITIONS OF APPROVAL, IF ANY:	LE	DATE

AUG 1 9 1974