	M. M. Q. R. R.	DOPY		
orm 9-331 May 1963)	NITED STATES DEPARTMENT OF THE IN GEOLOGICAL SURV	IERIOR verse side	netructions on re-	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. LC 029205 A
	NDRY NOTICES AND REPORT FOR PERMIT—" for		- x/	6. IF INDIAN, ALLOTTES OR TRIBE NAME
OIL GAS WELL	ESINGLAIR OIL CORPORAT	rion () ()	1968	7. UNIT AGREEMENT NAME
NAME OF OPERATOR	OIL & GAS COMPANY	Sinclair Oi	Corporation Merg	8. FARM OR LEASE NAME d Turner "A"
P. O. BO	x 1920, Hobbs, New Mexico	Martina N	i c Richfield Cempai Iarch 4 ₂ 1969	9. WELL NO.
LOCATION OF WELL See also space 17 b At surface	(Report location clearly and in accordance w	ith any State requirem	ents.•	10. FIELD AND POOL, OR WILDCAT Grayburg Jackson
	North line and 1980' fr t	he West line		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
4. PERMIT NO.	15. ELEVATIONS (Show wh	3714' GR		19-T175-R31E 12. COUNTY OF PARISH 18. STATE Eddy New Lexico
3.	Check Appropriate Box To Indi	cate Nature of No		Other Data
TEST WATER SHUT FRACTURE TREAT SHOOT OR ACIDIZE	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON®	PRACTU	SHUT-OFF RE TREATMENT NG OR ACIDIZING	REPAIRING WELL ALTERING CASING ABANDONMENT®
REPAIR WBLL (Other)	(Note: Report result			s of multiple completion on Well letion Report and Log form.)
7. DESCRIBE PROPOSED proposed work.	OR COMPLETED OPERATIONS (Clearly state all If well is directionally drilled, give subsurf			
3-4-68 Ran 3-5-68 Spo 3-6-68 San wat	electric log (Neutron Per otted 12,500# sand and temp ad Water Fraced Grayburg Op- ter and 30,600# sand plus 4 a. Press. 2000# @ 31.8 BFM. ean out sand and gyp to TD	orarily plug ben Hole 2957- 000# rock sal ISIP 1500#.	back to 3145 3145' w/30,0 t in 3 stage 10 mins. S	00 gals. gelled fresh s. Max. Press. 3300#, IP 1400#. 12 hr. SIP 150
3 -20-68 On	potential test 24 hrs. end 57-3465' 20 BNO, Gvty 34 pl			d Grayburg Open Hole
		ECEIV		ED
		MAR DE 109	<u>, </u>	RECLIVED MAR22 968 SURVER MAR22 OGICAL SURVER REGIONEW MEXICO
	•	C. C. C. ARTCHA. GFS:	ÖR X	RECL 968 SURVER MARYICO ARTESIA. NEW MEXICO
				An

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

SIGNED

TITLE Superintendent

DATE 3-21-68

(This space for Federal or State office use)

APPROVED BY
CONDENDATE OF APPROVAL, IF ANY:

MAR 2 2 130 AN Orte & 4cc:

*See Instructions on Reverse Side
USGS, Artesia, cc: Regional Office, cc: file