

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLI. E*
(Other Instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

023731-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(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 ☐

APR 16 1979

2. NAME OF OPERATOR

Sun Oil Company

O. C. C.
ARTESIA, OFFICE

3. ADDRESS OF OPERATOR

P. O. Box 1861 - Midland, Texas 79702

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

1980 FN & EL

RECEIVED

APR 11 1979

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

M. Dodd -B-

9. WELL NO.

29

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson (Q-SA)

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREASec. 10, T17S, R29E
Unit G

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

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 COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Intent Approved 2-29-78

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) Deepen F/Metex to Premier

(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.)*

TD 2700, 4 1/2 CS 2689, PBD 2650, Metex Perfs 2394-2404

LT 5-6-75 P 2 B0, 4 BW. Job to add Premier Perfs, Acidize, Frac and comingle w/Metex.

3-20-79 MIRU. POH w/R & P. Lower tbq to 2596. POH. Perf 2493-2507 w/1JSPF, 3 1/8 csg gun, 10 GM. Ran RDG pkr. Set Pkr 2436.

3-21-79 Test tbq to 5000#. OK. Acdzd Perfs 2493-2507 w/855 Gals 15% NEHC1. BDP 2800, MP 3900, MP 1100, FP 3000, ISIP 2800. 15 Min SITP 1500. Lwrdr pkr 2436 to 2475. 1 hr. swbd 12 BLW, No Oil. FL 800-2470. No FE in 1/2 hr.

3-22-79 3/4 hr. Swbd 6 BLAW, 1/2 B0. FL 1400-2470. Set pkr 2436. Frac Pfs 2493-2507 w/15,000 Gal Versagel & 15,000# 20/40 sand. BDP 2600, MP 3600, MP 3300, FP 3500 ISIP 2200.

3-23-79 18 hrs SITP 50#. In 1 hr F 20 BLAW, No oil. 8 hrs Swbd 230 BLW & trace oil. FL Surf-2400. No FE.

3-24-79 Swbd 3/4 hr. Rec 10 BLW. Rlstd Pkr POH. Reran tbq. & pump. TS 2557, PN 2523, SN 2522.

2-25,26 Sec Unit & Hook-up.

4-5-79 Final test, 24 hrs, P no oil, no wtr. Shut well in for evaluation.

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

SIGNED

TITLE Production Staff Associate

DATE 4-9-79

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) ALBERT R. STALL

TITLE ACTING DISTRICT ENGINEER

DATE APR 13 1979

CONDITIONS OF APPROVAL, IF ANY:

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY

APRIL OCTOBER 1, 1979

*See Instructions on Reverse Side

APR 1 - 1980

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLIC.

(See other in
function on
reverse side)Form approved,
Budget Bureau No. 47 R100

5. LEASE DESIGNATION AND SERIAL NO.

028731-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

M. Dodd -B-

9. WELL NO.

29

10. FIELD AND POOL, OR WILDCAT

Grayburg-Jackson (Q-SA)

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREASec. 10, T17S, R29E,
Unit G12. COUNTY OR
PARISH
Eddy13. STATE
New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐ APR 16 1979

b. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☒ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐O.C.C.
ARTESIA, OFFICE

2. NAME OF OPERATOR

Sun Oil Company ✓

3. ADDRESS OF OPERATOR

P. O. Box 1861 - Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 1980 FN & EL

At top prod. interval reported below

At total depth Same

14. PERMIT NO.

Blanket

DATE ISSUED

12. COUNTY OR
PARISH
Eddy13. STATE
New Mexico

15. DATE SPUDDED

9-14-68

16. DATE T.D. REACHED

9-18-68

17. DATE COMPL. (Ready to prod.)

1-17-70

18. ELEVATIONS (DP, RNP, RT, GR, ETC.)*

3992 GR, 3603 KB

19. ELEV. CASINGHEAD

3592

20. TOTAL DEPTH, MD & TVD

2700

21. PLUG. BACK T.D., MD & TVD

2650

22. IF MULTIPLE COMPL.
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

0-2700

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION: TOP, BOTTOM, NAME (MD AND TVD)*

2493-2507 Premier

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Schlumberger Density Log

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24.0	526	12 1/4	300 Sx	None
4 1/2	9.5	2690	7 7/8	250 Sx	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8	2557	None

31. PERFORATION RECORD (Interval, size and number)

2394-2404 Metex, 1JSPF
2493-2507 Premier, 1JSPF

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2493-2507	855 Gal 15% NEHC1

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
3-21-79		Pumping - 1 1/2" Pump				Shut-In	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4-5-79	24	None	→	0	0	0	0
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
	25#	→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Used for fuel & Rest sold

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

Production Staff Associate

DATE

4-6-79

*(See Instructions and Spaces for Additional Data on Reverse Side)