## UNITED STATES

SUBMIT IN TRIPLICATE.

Form approved.
Budget Bureau No. 42-R1424

| NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF  PULL OR ALTER CASING SHOOT OR ACIDIZE SHOOT OR ACIDIZE REPAIR WELL  (Other)  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.)*   | DEF  | 5. LEANE DENIGNATION AND BERIAL NO. SF-047039 (B)   |  |   |  |  |
|--|--|---|--|---|--|--|
| Other Well Well Well Well Wolfer  NAME OF OPERATOR  Petroleum Corporation of Texas Att: Fred Duesser  Petroleum Corporation of Texas Att: Fred Duesser  Oay "J"  3. Address of Operator  P. O. Box 911, Breckenridge, Texas 76024  4. Location of Well (Report location clearly and in accordance with any State requirements.*  At surface  790 'FSL, 790 'FEL  14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  17. Total Call of The Complete Silver of Adrian NM  16.  17. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASING NATURE TRACTURE TREAT MULTIPLE COMPLETE ABANDON*  SHOOTING OR ACIDIZE ABANDON*  SHOOTING OR ACIDIZE ABANDON*  CHANGE PLANS (Other)  |  | 6. IF INDIAN, ALLOTTEE OR THIBE NAME  |  |   |  |  |
| Petroleum Corporation of Texas Att: Fred Duesser  3. Address of Operator  P. O. Box 911, Breckenridge, Texas 76024  4. Location of well (Report location clearly and in accordance with any State requirements.*  At surface  790'FSL, 790'FEL  10. Riely And Pool, or Wildcar Fulcified Kutz Pictured Cliffs 11. Sec., 13. B., or Bele. And Survey or Arela Sec. 8-T28N-R10W N. M. P. M.  14. Permit No.  15. Elevations (Show whether DF, RT, GR, etc.)  5789'GR, 5799'DF, 5800'KB  San Juan  NM  16.  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Notice of Intention to:  Subsequent Report of:  Water Shut-off PRACTURE TREAT  MULTIPLE COMPLETE Shooting or Acidizing Abandon* Change Plans (Other)  17. Describe Profused 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.)*  | OIL GAS  | THER  |  | 7. UNIT AGREEMENT NAME  |  |  |
| P. O. Box 911, Breckenridge, Texas 76024  4. Location of well, (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  790 FSL, 790 FEL  15. Elevations (Show whether DF, RT, GR, etc.)  5789 GR, 5799 DF, 5800 KB  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Notice of Intention to:  Subsequent report of:  Test water shut-off Pull or alter Casing Nucltiple complete Shooting or activities and abandon*  Subsequent report of:  Water shut-off Practure treat Nucltiple complete Shooting or activities and abandon abandonment*  Subsequent report and Log form.)  17. Designed Fromosed or completed 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.)*  | 2. NAME OF OPERATOR  |   |  | 8. FARM OR LEASE NAME   |  |  |
| P. O. Box 911, Breckenridge, Texas 76024  4. Location of well, (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  790 FSL, 790 FEL  15. Elevations (Show whether DF, RT, GR, etc.)  5789 GR, 5799 DF, 5800 KB  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Notice of Intention to:  Subsequent report of:  Test water shut-off Pull or alter Casing Nucltiple complete Shooting or activities and abandon*  Subsequent report of:  Water shut-off Practure treat Nucltiple complete Shooting or activities and abandon abandonment*  Subsequent report and Log form.)  17. Designed Fromosed or completed 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.)*  | Petroleum Corr   | Day "J"   |  |   |  |  |
| At surface  The control of well (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  The control of well (Report location clearly and in accordance with any State requirements.*  The control of the con |  |   |  | 9. WELL NO.   |  |  |
| At surface  The control of well (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  The control of well (Report location clearly and in accordance with any State requirements.*  The control of the con | P. O. Box 911  | , Breckenridge, Texas   | 76024  | 3-R   |  |  |
| 790'FSL, 790'FEL  11. BBC, T, R., M., OB BLK. AND SURVEY OR AREA  Sec. 8-T28N-R10W  No. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  5789'GR, 5799'DF, 5800'KB  San Juan NM  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 Water shut-off Shoot or acidize Repairing well Shoot or acidize Abandon*  Shoot or acidize Abandon*  (Other)  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.)*   | 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) |   |  | 10. FIELD AND POOL, OR WILDCAT Fulcher Kutz   |  |  |
| 790'FSL, 790'FEL  14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  5789'GR, 5799'DF, 5800'KB  16.  17. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Notice of Intention to:  Test water shut-off FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* CHANGE PLANS (Other)  17. DESIGNED 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.)*   | Transaction of the second  |   |  | Pictured Cliffs   |  |  |
| 14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE ABANDON*  REPAIR WELL (Other)  (Other)  17. DESIGNED 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.)*  | 7001PGT 70011  | ent   |  | SURVEY OR AREA  |  |  |
| Test water shut-off   Pull or alter casing   Water shut-off   Fracture treat   Multiple complete   Shooting or acidizing   Abandon*   Shooting or acidizing   Abandon*   Change plans   Completion or Recompletion Report and Log form.)  17. Describe 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.)*  | /90.ESL, /90.1   | FEL   |  | Sec. 8-T28N-R10W  |  |  |
| Test water shut-off   Pull or alter casing   Water shut-off   Fracture treat   Multiple complete   Shooting or acidizing   Abandon*   Shooting or acidizing   Abandon*   Change plans   Completion or Recompletion Report and Log form.)  17. Describe 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.)*  | 14 PERMIT NO   | 15 ELEVATIONS (Show whether DE  | PT CP etc.)  | N M P M   |  |  |
| Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  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.)*  | 14. IBBAIL DO.   |   |  |   |  |  |
| NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF  PULL OR ALTER CASING SHOOT OR ACIDIZE SHOOT OR ACIDIZE REPAIR WELL  (Other)  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.)*   |  | 5/89 GR, 5/99 L   | DF, 5800 KB  | San Juan   NM   |  |  |
| TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF X REPAIRING WELL  SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING ABANDONMENT*  (Other) (Other) (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.)*   | 16. Che  | eck Appropriate Box To Indicate N   | ature of Notice, Report, or C  | Other Data  |  |  |
| FRACTURE TREAT  MULTIPLE COMPLETE  SHOOT OR ACIDIZE  REPAIR WELL  (Other)  CHANGE PLANS  (Other)  (Other)  (Other)  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.)  **  **  **  **  **  **  **  **  **   | NOTICE OF INTENTION TO:  |   | SUBSEQUENT REPORT OF:  |   |  |  |
| SHOOT OR ACIDIZE  REPAIR WELL  (Other)  (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.)*  | TEST WATER SHUT-OFF  | PULL OR ALTER CASING  | WATER SHUT-OFF   | REPAIRING WELL  |  |  |
| (Other)  (Other)  (Other)  (Other)  (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.)*   | FRACTURE TREAT   | MULTIPLE COMPLETE   | FRACTURE TREATMENT   | ALTERING CASING   |  |  |
| (Other)  (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.)*  | SHOOT OR ACIDIZE   | ABANDON*  | SHOOTING OR ACIDIZING  | ABANDON MENT*   |  |  |
| 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.)*  | REPAIR WELL  | CHANGE PLANS  |  |   |  |  |
| 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.) *  | (Other)  |   |  |   |  |  |
|  | proposed work. If well is  | TED OPERATIONS (Clearly state all pertinent directionally drilled, give subsurface locations) | details, and give pertinent dates,<br>ions and measured and true vertice | including estimated date of starting any al depths for all markers and zones perti- |  |  |
| 5-27-78 Spud well  | 5-27-78  | Spud well   |  |   |  |  |
| 5-27-78 T.D. 140'  | 5-27-78  | T.D. 140'   |  |   |  |  |
| Ran 3 jts., 8-5/8", 24.0 lb, K-55 casing (126.70')   | ]  | Ran 3 jts., 8-5/8", 24  |  |   |  |  |
| set at 137.70' with 100 sacks Class "B" cement   |  |   |  |   |  |  |

- with 3% Calcium Chloride and ½ lb. Flocele per sack, cement circulated. Test with 500 psig. Test O.K.
- T.D. 2146' 5-30-78 Ran 65 jts,  $4\frac{1}{2}$ ", 10.50 lb, K-55 casing (2105.00') set at 2115.00' with 100 sacks 65/35 Pozmix (12% Gel) with 6½ lbs. Gilsonite per sack followed by 250 sacks 50/50 Pozmix with 6% lbs. Gilsonite per sack, Cement circulated

RECEIVED

| For: Petroleum Corporat                      | cion of Texas          |      | <u> </u> |
|--|------------------------|------|----------|
| SIGNED EWELL N. Walsh, P.E.                  | President, Walsh Engr. | DATE | 6-6-78   |
| (This space for Federal or State office use) |                        |      |          |
| APPROVED BYCONDITIONS OF APPROVAL, IF ANY:   | TIMLE                  | DATE |          |