|  | ( 9-331<br>γ 1963)<br>ΓΞΟΔ   | NITED STATES RT.LENT OF THE INTERI             | SUBMIT IN T LICATE (Other instru 3 on reverse side)  | Form approved. Budget Bureau No. 42-R1-24. 5. LEASE DESIGNATION AND SERIAL VO.   |  |
|--|--|--|--|--|--|
|  |  | GEOLOGICAL SURVEY                              |  | 078107   |  |
|  | SUNDRY N (Do not use this form for pure "API                                 | OTICES AND REPORTS O                           | ACT HE THE CONTROL OF | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME   |  |
|  | OIL X GAS OTH  |  | EB 24 1967   | 7. UNIT AGREEMENT NAME   |  |
|  | NAME OF OPERATOR   |  | OIL CON. COM.  | 8. FARM OR LEASE NAME  |  |
|  | Sunray DX Oil Compa  | ny   | DIST. 3  | New Mexico Federal "L"   |  |
| •  | ADDRESS OF OPERATOR  O. Box 1416, Ros  | well. New Mexico                               |  | 3  |  |
| 4. I   | OCATION OF WELL (Report locat  | State requirements.                            | 10. FIELD AND POOL, OR WILDCAT   |  |  |
|  | See also space 17 below.)<br>At surface                                      |  |  | Undesignated   |  |
| 7  | .980' FSL & 1980' F  | n T  |  | 11. SEC., T., R., M., OR SIK. AND<br>SURVEY OR AREA  |  |
| 1  | .900 FSL & 1900 F.   | D.L.   |  | Sec 33, T-30-N, R-15-W   |  |
| 14. 1  | PERMIT NO.   | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) |  | 12. COUNTY OR PARISH 13. STATE   |  |
|  |  | 5351 D   | F  | San Juan   New Mexico  |  |
| 16.  | Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data    |  |  |  |  |
|  | NOTICE OF INTENTION TO:  |  |  | JENT REPORT OF:  |  |
|  | TEST WATER SHUT-OFF  | PULL OR ALTER CASING                           | WATER SHUT-OFF   | REPAIRING WELL   |  |
|  | FRACTURE TREAT   | MULTIPLE COMPLETE                              | FRACTURE TREATMENT   | ALTERING CASING  |  |
|  | SHOOT OR ACIDIZE   | ABANDON*                                       | SHOOTING OR ACIDIZING  | ABANDONMENT*   |  |
|  | REPAIR WELL  | CHANGE PLANS                                   | (Other)(Note: Report results   | of multiple co detion on Well  |  |
| (Other)  Plug & Abandon  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 proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones |  |  |  |  |  |
|  | proposed work. If well is d<br>nent to this work.) *                         | irectionally drilled, give subsurface loca     | tions and measured and true vertice  | if depths for an markets and godes perti-  |  |
| 1.   | Present PBTD 4255  | 1.   |  |  |  |
| 2.   | Top of cmt behind<br>@ 164' w/100 sxs<br>Perfs @ 4136'-423                   | cmt circulated to surfac                       | @ 3300' by calculatice. 4 1/2" prod. csg   | on. 8 5/8" surface csg se<br>. set @ 4331' w/225 sxs cm  |  |
| 3.   | Load hole w/mud.   |  |  |  |  |
| 4.   | . Cut off 4 1/2" csg @ approx 3200'. Pull prod. csg. Keep hole loaded w/mud. |  |  |  |  |
| 5.   | Place 20 sxs cmt plug (4010'-4255') to cover perfs.                          |  |  |  |  |
| 6.   | Place 10 sxs cmt p   |  |  |  |  |
| 7.   | Place 17 sxs cmt p   | olug (134'-194') in & ou                       | at of 8 5/8" csg.  |  |  |
| 8.   | Set 10 sx cmt plug   | g @ surface.                                   |  | RECEIVED   |  |
| 9.   | Install dryhole ma   |  |  | NOV 17 1966  |  |
| O. Remove surface equipment & clean up location.   |  |  |  | U.S. GEOLOGICAL SURVEY   |  |
|  | SIGNED (SIGNED )   |  | istrict Engineer   | FARMINCTON, N. M.  DATE 11-14-66   |  |
| 1  | (This space for Federal or Sta   | te office use)                                 |  |  |  |
| i tro  | APPROVED BY TITLE  |  |  | DATE   |  |
| (  | CONDITIONS OF APPROVAL,  | IF ANY:  |  | Edition of the control of the contro |  |
|  | NOV 17 1960<br>July R W  |  | s on Reverse Side  | ర్వాణం కొర్పున్ని  |  |
|  | ACTING DISTAICE LEG  |  |  |  |  |