

UNITED STATES OF AMERICA
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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(Other instruction on reverse side)

Copy to SF
Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC 28731-A	
2. NAME OF OPERATOR Sun Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1861, Midland, Texas 79701 O. C. C.		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with ARTESIA OFFICE. See also space 17 below.) At surface 1650' FEL & 330' FSL, Sec. 22		8. FARM OR LEASE NAME M. Dodd "A"	
14. PERMIT NO. Blanket		9. WELL NO. 8	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) DF 3559		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22, T17S, R29E	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	(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.) *

1. MIRU POH w/tbg. Dump sand to fill open hole from 3258 (TD) to 3185.
2. Perf additional porosity w/1JSPF from 3092-3105 & 3154-3180.
3. Acdz perfs 3092-3180 w/4000 gals 15% NEHCL & flush w/fresh wtr.
4. Swab load & acid wtr. If additional stimulation is indicated by swab test:
frac w/10,000 gals acid K-frac & 13,000# 20/40 sand.
5. RIH w/tbg & reverse sand out of open hole. Place well on pump & test.

RECEIVED

NOV 08 1976

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED <u>Charles Gray</u>	TITLE <u>Proration Analyst</u>	DATE <u>11/4/76</u>
(This space for Federal or State office use)		
APPROVED BY <u>Joe G. Lara</u>	TITLE <u>ACTING DISTRICT ENGINEER</u>	DATE <u>NOV 9 1976</u>
CONDITIONS OF APPROVAL, IF ANY:		