

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

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. L C 028731 (5)
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	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit Letter O, 660' FSL & 1980' FEL	8. FARM OR LEASE NAME M. Dodd "B"
14. PERMIT NO.	9. WELL NO. 34
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GA. 3599.8 DF. 3609 RT. 3610	10. FIELD AND POOL, OR WILDCAT Grayburg Jackson
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 14, T-17-S, R-29-E
	12. COUNTY OR PARISH Eddy
	13. STATE N. Mex.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Acid, Frac. & Casing Rept	<input checked="" type="checkbox"/>		<input checked="" 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.)*

Move in rigged up. Spudded 12:00 noon 8-19-71
Set 8 5/8" 20# Grade Grade "B" casing @ 457', cemented w/250sx. circ. to surf.
Tested @ 800# for 30 minutes. August 20, 1971
Set 5 1/2" 15.5# J-55 casing @ 3380', cemented w/1700 sx. circ. to surf. Tested @ 2500# August 28, 1971
Perf 56 holes (.42" hole) from 2438/3334. September 1, 1971
Acid and Frac. Program as Follows:

Date	Perfs	Amount & Material	Max. Press.
9-2-71	3214/3334	1000 gals. DS-30 Acid - 16 Ball Sealers	2900#
9-2-71	2960/3048	2000 gals. DS-30 Acid - 30 Ball Sealers	3300#
9-2-71	2772/2853	1500 gals. DS-30 Acid - 30 Ball Sealers	4000#
9-2-71	2438/2450	500 gals. DS-30 Acid - 10 Ball Sealers	3300#
9-2-71	2438/3334	Fraced w/100,000 gals. 9.0#/ gal. gelled brine wtr. & 100,000 # 20/40 Sd. Flush w/120 bbls. brine.	3000#
10-19-71	2438/2450	Squeeze w/1500 gals. Zonelock 155	1600#
10-22-71	2438/2450	Squeeze w/150 sx. Class "C" Cement	3200#

APPROVED
NOV 10 1971
BEEKMAN
ACTING DISTRICT ENGINEER

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

TITLE Proration Clerk

DATE 11-5-71

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE