## N. M. O. C. C. COPY

TED STATES DEPARTML, T OF THE INTERIOR (Other instructic verse side)

SUBMIT IN TRI

Form approved. Budget Bureau No. 42-R1424. TATE:

5. LEASE DESIGNATION AND SERIAL NO.

LC 029395 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

GEOL	OGICAL	SURVE	Y

		_	•••		. ,	. • .				.,	-	* • •	<b>U</b> 11	* *		
(Do :	not	use	this	form	for	propos	sals to	drill	or	to deep	en or	plug	back to	8	different reservoir.	
				Use	"Al	PLICA	ATION	FOR	PE	RMIT—	" for	such	proposal	s.)		

CHAIDDY MOTICES AND DEDODES ON WELLS	6.	IF	INDIAN	, AL	LOTTEE	OR TRIB	E NA
SUNDRY NOTICES AND REPORTS ON WELLS	1-1-	-		ber 1.	1.2	<b>&gt;~</b>	
se this form for proposals to drill or to deepen or plug back to a different reservoir.				. =	2 E	· .	
Use "APPLICATION FOR PERMIT—" for such proposals.)					- C - S	ψ.	
	- <u>-</u> -						

Use "Al	\$5.5			
OIL X GAS OT	HER	RECEIVED	7, UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Atlantic Richfield	d Company	MAR - 7 1974	8. FARM OR LEASE NAME - Turner "B" (B)	
3. ADDRESS OF OPERATOR			9. WELL NO.	
P. O. Box 1710, He	obbs, New Mexico 88240	o. c. c.	48	
4. LOCATION OF WELL (Report loca See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT Grayburg Jackson OGSA			
560' FNL & 1980'	FWL (Unit letter C)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  Sec 29, T17S, R31E	
14. PERMIT NO.	12. COUNTY OR PARISH 13. STATE			
	3675' GL		Eddy N.M.	
16.	d. A Pau Ta ladianta N	Law of Nickar D	Od D	

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

WOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: 🚍 TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL X PRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING SHOOT OR ACIDIZE ARANDON\* SHOOTING OR ACIDIZING ABANDONMENT\* REPAIR WELL CHANGE PLANS (Other) (Other)

(Nore: 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.)\*

Oil production from this well has declined steadily and a fracture treatment will be performed to restore production in the following manner.

Clean out to 3335' w/sand pump. Run frac pkr on 2-7/8" tbg and treat perfs 3214-3322' w/10,000 gals of Mini-Max gel and 14,000# 20/40 sd & scale inhibition chemical. Run rods and pump and return to production.

RECEIVED School of the second of the second

		ਦੇਸ਼ੀ ਤਹਿੰਸ਼ ਵਿੱਚ ਹੈ। ਉਨ੍ਹਾਂ ਵਿੱਚ ਵਿੱਚ ਹੈ।
18. I hereby certify that the foregoing is true and correct  SIGNED	TITLE Dist. Drlg. Supv.	DATE 3/4/74
(This space for Federal or State office use)  APPROVED BY	TITLE	The first of the f
CONDITIONS OF APPROVAL IF ANY:		bright will be bright with a section with a section with the section will be bright with a section with a secti
MAR 6-137	ee Instructions on Reverse Side	Sala a Sala