

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

ARTESIA, NM 88210

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.
LC-029415-B
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR WILLIAM A. & EDWARD R. HUDSON ✓		8. FARM OR LEASE NAME Puckett "B" O. C. D.	
3. ADDRESS OF OPERATOR Box #198, Artesia, New Mexico 88210		9. WELL NO. 29	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1295' from south and 1345' from east lines of Section 25-17S-31E.		10. FIELD AND POOL, OR WILDCAT Maljamar (G-sa)	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.)	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25-17S-31E		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

16. 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:

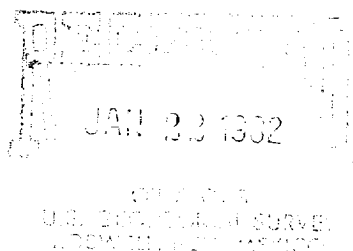
WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input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

Packer set at 3875'. On Jan. 7, 1982, acidized perforations at 3894-3919 with 2,000 gals. 20% acid containing 25 gals. ProtexA11 and 25 gals. corrosion inhibitor. Formation broke at 2800 psi. Treated at 2600 psi. at 3 BPM. Instant S.I. pressure was 2100 psi. Some restricted communication was noted.

Reset packer at 3782'. On Jan. 9, 1982, acidized all perforations with 2,000 gals. 20% acid with ProtexA11 and corrosion inhibitor. Acid was preceded with 200# salt plug. First stage (1,000 gals. acid) treated at 1600 psi. at 2½ BPM. After 20 bbls. acid in, ran 200# rock salt plug. Second stage treated at 1900 psi. at 2½ BPM.



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

SIGNED Roger A. Chapman Consulting Engineer DATE Jan. 21, 1982
(This space for Federal or State office use)

APPROVED BY FEB 1 1982 TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side