		C/SF
Form 9–331 (May 1963)	UN ED STATES DEPARTME OF THE INTERIOR (Other instruction re GEOLOGICAL SURVEY	
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	NDRY NOTICES AND REPORTS ON WELLS his form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)	
1.		7. UNIT AGREEMENT NAME
OIL GAS WELL WEL		
2. NAME OF OPERATOR Sun Texas		8. FARM OR LEASE NAME Phantom Draw Feelennet Unit
3. ADDRESS OF OPERA	TOR	9. WELL NO.
	4067, Midland, Texas 79704	10. FIELD AND POOL, OR WILDCAT
See also space 17   At surface	below.)	Phantom Draw Wolfcamp
Unit M, 1	000' FWL & 800' FSL	11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA
		Sec. 20, T-26-S, R-31-E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	GR 3188'	Eddy  New Mexico
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or (	Other Data
	NOTICE OF INTENTION TO: SUBSEQ	UENT REPORT OF:
TEST WATER SHU FRACTURE TREAT	T-OFF PULL OR ALTER CASING WATER SHUT-OFF 	ALTERING CASING
SHOOT OR ACIDIZE		X ABANDONMENT*
REPAIR WELL (Other)	CHANGE FLANS (Other) (Other) (NOTE : Report result	s of multiple completion on Well
nent to this work	or COMPLETED OFERATIONS (Clearly state all pertinent details, and give pertinent dates If well is directionally drilled, give subsurface locations and measured and true vertice.)* to increase gas production.	, including estimated date of starting any cal depths for all markers and zones perti-
12-6-80	Ran log 12,800'-11,600'. SI 3 hrs., SITP 1250 psi	
12-7,8-80	Shut down.	
12-9-80	Perf. from 12,671'-12,699' w/2 SPF (total 56 holes hyperdome tbg gun. Tested backside to 2000 psi. I perfs 12,451'-12,728' w/15,000 gals. 20% HCl w/add per bbls. in 3 equal stages, separated by 2-600# b salt and 100# Benzoic acid flakes in gelled brine.	Held OK. Acidized tives and 600 SCF/N2
12-10-80 thru 12-18-80	Recover load.	
12-19-80	F/24 hrs. REC 3 BO, 42 BW, 780 MCF	
SIGNED _K	ederal or State office use)	DATE
V.		
APPROVED BY _ CONDITIONS OF	APPROVAL, IF ANY:	DATE

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\*See Instructions on Reverse Side