

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE  
(Other instructions on  
reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 062391

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR BLK. AND

12. COUNTY OR PARISH

13. STATE

## 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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Citizen Service Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 69 - Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)At surface 500' FSL & 330 FSL Sec. 34-T17S-R33E  
Lea County, New Mexico

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4142 DF

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

Perf. additional Abo Zone

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

OTO 8325 OPRD 8378 At the present time the above well is producing 70 80 + 30 BWPD through Abo Perfs. 8324-8338. We propose to workover the above well as follows:

1. Kill well and pull tubing.
2. Perf. Abo w/1 hole each @ 8695, 8697, 8700, 8711, 8717, 8729, 8731, 8735, 8740, 8743, 8746, 8750, 8755, 8758, 8766, 8774, 8778 and 8780.
3. Run retrievable BP @ 8810.
4. If well does not test over allowable, acidize perfs. (8695-8780) w/15,000 gals. of retarded acid.
5. Shut well for test, if well will flow allowable leave BP in @ 8810 and complete from perfs. 8695-8780, if not, pull BP @ 8810 and recomplete from all perfs. (8695-8838).

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

SIGNED

TITLE

District Superintendent

DATE

7-26-66

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

