

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

(Do not use this form for proposals to drill or to deepen or pump back to different reservoirs. Use "APPLICATION FOR PERMIT—" for such proposals.)

**2. NAME OF OPERATOR**

MGF Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 360, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

660' FSL & 510' FWL, Section 3, T-12-S, R-33-E

14. PERMIT NO.

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

4263' KB; 4251' GL

12. COUNTY OR PARISH

13. STATE

Tea

New Mexico

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 COMPLETE**

**ABANDON\***

## CHANGE PLANS

**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). \*

July 29, 1982

- 1) Set Howco 4 1/2" EZSV retainer at 9442'.
- 2) RIH w/tubing, load hole, sting into retainer.
- 3) Squeeze Dallas perfs w/100 sxs Class "H" cement, reversed out 20 sxs. cement.
- 4) Displaced w/2% KCl and spot 100 gallons 15% HCl acid across Felmont (9300-9405').
- 5) Perforate Felmont w/3 1/8" casing gun 1 JSPF @9300, 02, 04, 06, 13, 19, 21, 23, 29, 58, 60, 61, 62; 9405, 06'. (15 holes)
- 6) Set packer @9200'.
- 7) Acidize Felmont zone w/6000 gals 15% NE HCl acid and 27 ball sealers. Flush w/ 2% KCl water.

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

**SIGNED**

TITLE Division Operations Mang. DATE 8-19-82

(This space for Federal or State office use)

(ORIG. SGD.) DAVID R. GLASS

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL IF ANY \_\_\_\_\_

**TITLE**

DATE \_\_\_\_\_

U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

RECEIVED  
OCT 14 1982  
G.C.D.  
HOBBS OFFICE