Form	9-331
(May	1963)

UNTED STATES DEPARTMEN. OF THE INTERIOR

SUBMIT IN TRIPL' TEO (Other instructions re-

Form approved, Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND BERIAL NO.

El. OF THE INTERIOR	erke Bide)			DESIGNATIO			
FOLOGICAL SUBVEY	λ/.	MA	יון ח	₹ 6 ₹1 -∦ `2	Loor	Morrie	

•	/M 0 45651-X AT	W Mexico				
SUNDRY NOT	6. IF INDIAN, ALLOTTER	OR TRIBE NAME				
	58 // 65		7. UNIT AGREEMENT NA	MB ·		
WELL GAS OTHER						
, NAME OF OPERATOR			8. FARM OR LEASE NAM	8. FARM OR LEASE NAME		
Marathon Oil Compa	ny		Followed Silv	rer MAN / Level		
Box 220 Hobbs, Ne	w exico		9. WELL NO.			
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface				10. FIELD AND POOL, OR WILDCAT Allison-Penn Pool		
660' FSL & 660' FEL	of Sec 20. SE/4, SE	1/4 of Sec. 20	11. SEC., T., R., M., OR S SURVEY OR AREA Sec 20, Twp 8	<u> </u>		
4. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, QR, etc.) 4. Q12 GR			12. COUNTY OR PARISH ROOSEVELT	18. STATE New Mexico		
6. Check A	ppropriate Box To Indicate I	Nature of Notice, Report, o	r Other Data			
NOTICE OF INTE	NTION TO:	SUBS	EQUENT REPORT OF: -			
TEST WATER SHUT-OFF FRACTURE TREAT	PULL OR ALTER CASING MULTIPLE COMPLETE	WATER SHUT-OFF FRACTURE TREATMENT	REPAIRING V			
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONME!	NT®.		
REPAIR WELL (Other)	CHANGE PLANS	(Other) (Note: Report resi	ults of multiple completion mpletion Report and Log for	on Well		
•		(Note: Report rest Completion or Reco	mpletion Report and Log for	rm.)		

7. 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.) •

Well was treated with 500 gallons mud acid in open hole section from 9471 to 9501. Unable to break formation with 3900# pressure. Latest bottom hole pressure in this field is 165 psi. Well temporarily abandoned pending further engineering study. Tubing left in well.

SIGNED allast mechla	TITLE Assit. S	Supt. DAT	2-15-65
(This space for Federal or State office use)		•	
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	APPROVE'S	3
		r EU 19 1855	

*See Instructions on Reverse Side

May 1		Budget Bureau No. 42 R1424. 5. LEASE DESIGNATION AND SERIAL NO. O 45651-A New Lexico			
	SUNDRY WOS LES CAMP. REPORTS ON WELLS (Do not use this form for proposals to delil or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
OIL WE		7. UNIT AGREEMENT NAME			
2. NA1	Marathon Oil Company	8. FARN OR LEASE NAME Fodorel Silver "A"			
3. ADI	Box 220 Hobbs, New Mexico	9. WELL NO.			
A t	cation of well (Report location clearly and in accordance with any State requirements.* e also space 17 below.) surface 60! FSL & 660! FEL of Section 20. SE/4, SE/4 of Sec. 20	Allison-Penn Pool 11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA			
1.4 1121	RMIT NO. 15, ELEVATIONS (Show whether DF, RT, QR, etc.)	Sec. 20, Twp 8S, Rge 37E			
14. 16	— 4012 ° Cr	Roosevelt New Mexico			
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or C	Other Data			
	NOTICE OF INTENTION TO: SUBSEQU	ENT REPORT OF:			
F	PULL OR ALTER CASING WATER SHUT-OFF RACTURE TREAT MULTIPLE COMPLETE HOOT OR ACIDIZE **ABANDON*** WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING	REPAIRING WELL ALTERING CABING ABANDONNIENT*			

(Other)

(Other)

(Other)

(Other)

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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It is proposed to acidize well with 500 gallons mud acid, in open hole section from 9471' to 9501'.

8. I hereby certify that the foregoing is true and cor	A	Assit. Supt.	DATE 2- 12-65
(This space for Federal or State office use)	<u> </u>		DATE OVED
CONDITIONS OF APPROVAL, IF ANY:	TITLE _		APPROVE-

*See Instructions on Reverse Side

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