| Form | 9-331 |
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| May | 1953) |

HNLTED STATES

| | Form approved. |
|---|-------------------------------------|
| | Budget Bureau No. 42-R142 |
| i | 5. LEASE DESIGNATION AND SERIAL NO. |

| | (May 1953) | DEPARTM | OF THE | INTERIOR | (Other instructions | Te- | | t Bureau No. 4. | |
|---------|---|--|--------------------------------------|--|--------------------------|----------------|---------------------------------------|----------------------|-------------|
| 5000 | ADTERIA | | EOLOGICAL SL | | verse side) | | | | IXL NO. |
| ADDC - | ARTESIA | - | | | | | NM 02739 | LLOTTEE OR TRH | E NAME |
| NGGU - | F0325 | SECUDRY NOTI | CES AND REI | PORTS ON | WELLS | | | | |
| M - 5.: | 2 Do not us | e ttals form for propose Use "APPLICA" | TION FOR PERMIT— | en or plug back to be for such propose | o a different reservoi | r 1 '58 | | | |
| | 1. | | | | | 7. UNIT AGREEM | IENT NAME | | |
| | WELL X WELL OTHER | | | | | | | | |
| | 2. NAME OF OPERA | тов | | | | | 8. FARM OR LEA | ISE NAME | |
| | Pennzoil United, Inc. | | | | | | Pubco "3 | 3" Federa | 1 |
| | 3. ADDRESS OF OPERATOR | | | | | | 9. WELL NO. | | |
| | P. O. Drawer 1828 - Midland, Texas 79701 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* | | | | | 10. PIECD AND | POOL, OR WILDCA | T | |
| | See also space : At surface | See also space 17 below.) | | | | | | 3 2 5 3 | |
| | 810 FSL & 1980 FEL of Sec. 33, T-8-S, R-31-E, | | | | | | Wildcat 11. sec., T., R., | M., OR BLK. AND | |
| | Chaves County, New Mexico | | | | | | SURVEY C | R AREA | |
| | | | | _ | | | Sec. 33, | T-8-S, R | -31-E |
| | 14. PERMIT NO. | | 15. ELEVATIONS (Sho | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | | 12. COUNTY OR | PARISH 13. ST. | ATE |
| | | | | 4258 GL | | | Chaves | N. | М. |
| | Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data | | | | | | | | |
| | • | NOTICE OF INTENT | | 1 | , | | ENT REPORT OF: | 200 | |
| | | | | | | | 1.7 | | |
| | TEST WATER S' | | ULL OR ALTER CASING ULTIPLE COMPLETE | | WATER SHUT-OFF |).m | | IRING WELL | |
| | SHOOT OR ACID | <u> </u> | BANDON* | | FRACTURE TREATME | | | RING CASING DONMENT* | |
| | REPAIR WELL | | HANGE PLANS | | (Other) | | | - | - |
| | (Other) | | | | (Note: Repor | t results | of multiple comp | Dietion on Well | |
| | 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per | | | | | | | | ting any |
| | nent to this w | ork.) * | any urmed, give sub | surface locations : | ina measurea aha tri | ue vertical | i depths for all i | markers and zor | es perti- |
| | | • | | | | £. | | | |
| | 9-22-68 | Ran Correlati | lon log, perf | orate 3 ho | les in same _I | place | @ 10,586 '. | Ran 2 3/ | 8'' |
| | | tbg. and pack | | | | | | | |
| | gals mud acid. Swab and recover flush oil then swab to squeeze perfs @ 10,586'. | | | | | | 100% water | . Prepar | e |
| | | to squeeze pe | eris @ 10,586 | • | | ž | | | |
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| | | | • | | | 4 | 현화기 <u>활</u> | 취원성원 | |
| | | | | | • | # 2 | <u> 5</u> | | • |
| • | | • | | | | 9 15 | | E Wille | 7.7 |
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| | | | | | | 3 | Est OCT | 8 1968 | |
| | | | | | • | Ű, | 생활범의 입금. | | |
| | | | | | • | | S. GEGLO | DCJČÆLÍSURVE | ÷ |
| | • | | • | | | | ्रें इर्ड Swell, | and with Exico | |
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| | 18. 1 y certify | that the foregoing is | true and correct | | | | Janes Ber | 1,500 | |
| | SIGNAD LC | chrey (1) | T | ITLE Pet | roleum Engine | eer | DATE | 10-4-68 | |
| | (This space for | Federal or State office | nse) | | | · · · · · · | | <u></u> | |
| | (with older 101 | Tousianor brace omce | | | | <u> 5</u> . | | | |
| | APPROVED BY | F APPROVAL, IF AN | | ITLE | | ¥ - | DATE | · · | |
| | CONDITIONS | A TITTOANN IE AN | •• | | | | | | |