NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE	NEW MEXICO OIL CONSER	VATION COMMISSION		Form C-103 Supersedes Old C-102 and C-103 Effective 1-1-65	
FILE U.S.G.S.	4		1	5a. Indicate Type of Lea	
LAND OFFICE				State K	Fee X
OPERATOR				5. State Oil & Gas Leas LG-1432-1	e No.
(DO NOT USE THIS FORM FOR PR USE "APPLICA"	RY NOTICES AND REPORTS ON WI	ELLS (to a different reservoir roposals.)			
1. OIL CAS WELL WELL X	OTHER-			7. Unit Agreement Name	
2. Name of Operator		8. Farm or Lease Name			
Allen K. Trobau	Eidson Com.				
3. Address of Operator	9. Well No.				
1405 First Nat'	l Bank Bldg, Midland,	Texas 79701		1	
4. Location of Well				10. Field and Pool, or W	
UNIT LETTERG	EET FROM	ndes.Townsend	d(Morrov		
	16S				
		12. County Lea			
16. Check	Appropriate Box To Indicate Nat	ure of Notice, Repor	t or Oth	er Data	
NOTICE OF I	NTENTION TO:	SUBSI	EQUENT	REPORT OF:	
PERFORM REMEDIAL WORK		EMEDIAL WORK OMMENCE DRILLING OPNS. ASING TEST AND CEMENT JOB OTHERAttempt		ALTERING CAS PLUG AND ABAN	
OTHER					

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Ran 323 joints (13,064.35') new and used 4½" N-80 &rd & buttress casing to 13,033'. Cmtd w/1000 sax Class H cmt. WOC 8 hrs and ran temperature survey. Top/cmt 9000'. WOC total 18 hours. Circulated hole w/2% KCL water. Spotted 200 gals acetic acid. Perf 12,988-12,992 w/2 shots/ft. Set packer @ 12,769'. Pressured up on casing to 1000#. Held okay. Ran tubing and tested well at rate of 750,000 MCFD + 81 bbls condensate. Pulled tubing to locate leak. Replaced tubing collars and reran tubing. Acidized Morrow formation w/1000 gals 7½% acid, flushed w/34 bbls KCL + 58,000 scf of nitrogen. Injection rate 3 bpm. Maximum treating pressure 8700 psi, minimum 6500 psi, ISDP 8000 psi; after 13 min 4400 psi; after 30 min 3700 psi. Unloaded acid. Now testing.

18. I hereby certify	that the information pove is	s true and complete to the be	st of my knowledge and be	ellef.
SIGNED CLU	il Chit	augh TITLE_	Operator	DATE 1/14/80
		-0		
APPROVED BY	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	TITLE		DATE 1980
CONDITIONS OF A	PPROVAL. IF ANY:			