| Form  | 9-331 |
|-------|-------|
| + May | 1963  |

## **TATES** UNITE DEPARTMENT OF THE INTERIOR (Other Instructions on re-GEOLOGICAL SURVEY

SUBMIT IN TRIPLICAT

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

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

REPAIRING WELL

ALTERING CASING

| NM    | 14931 |
|-------|-------|
| 1 1 1 | 1441  |

| SUNDRY | <b>NOTICES</b> | AND | REPORTS | ON | WELLS |
|--------|----------------|-----|---------|----|-------|
|--------|----------------|-----|---------|----|-------|

CHANGE PLANS

|     | (Do not use this form for proposals to drill or to deepen or plug be "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug be "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug be a proposal to drill or | ick to a different rese | rvolr.      |   |                  |
|-----|--|-------------------------|-------------|---|------------------|
| 1.  | OIL X GAS OTHER  | REGE                    | I W IS IN   | 7. UNIT AGREEMENT                       | NAME             |
| 2.  | NAME OF OPERATOR   | Utt - 2                 | 世世代         | S. FARM OR LEASE N                      | IAME             |
|     | Sun Oil Company  | MAY 1                   | 1070        | Tonto Fede                              | ral              |
| 3.  | ADDRESS OF OPERATOR  |                         | -1310       | 9. WELL NO.                             |                  |
|     | P. O. Box 1861 Midland, Texas 79702  | U. S. GEOLOGI           | ്ഷ വേഗ      | . 1                                     |                  |
| 4.  | LOCATION OF WELL (Report location clearly and in accordance with any See also space 17 below.)  At surface   | State MOBRIST WEV       | N WEXICO    | Lusk, Bone Wolfcamp                     | Springs &        |
|     | 660 FNL, 660 FWL of Sec. 27, TNSP 19S,   | RG. 32E, UNIT           | מ י         | 11. SEC., T., R., M., O<br>SURVEY OR AR | R BLK. AND<br>BA |
|     |  |                         |             | 27-198-32                               | E                |
| 14. | PERMIT NO. 15. ELEVATIONS (Show whether DF.  | RT, GR, etc.)           |             | 12. COUNTY OR PARI                      | SH 13. STATE     |
|     | Blanket RKB 3606, GR 3588  |                         |             | Lea                                     | NM               |
| 16. | Check Appropriate Box To Indicate No   | ature of Notice, R      | eport, or O | ther Data                               |                  |
|     | NOTICE OF INTENTION TO:  | ,                       |             | ENT REPORT OF:                          |                  |

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

1978

REPAIR WELL

4-16/21

MIRU, cleaned around well & dugout cellar, NU BOP, pull 2 7/8" tbg, run gauge ring to 10000', dumped 35' cmt plug on CIB Pat 10,500', set CIBP @ 10,000', dumped 35' cmt plug on CIBP, load hole w/9.5# brine, ND BOP & WH, weld on to 5 1/2" csg, pull slips & worked csg, ran free point, stuck at 7700', cut pipe at 7650', pulled csg, NU BOP, TIH w/2 7/8" tbg to 7686, circ hole w/10# mud, spot 50 sk cmt plug 7500/7686', spot cmt plug 4400'/4586', spot 35 sks cmt 2530/2630', 35 sks 950/1050, 30 sks 90' to surface. ND BOP, cut off csg flange. Weld plate on 9 5/8" csg, inst dry hole marker, RR 4 PM

WATER SHUT-OFF

PRACTURE TREATMENT

SHOOTING OR ACIDIZING

| 8. I hereby certify that the foregoing is true and correct SIGNED SUM HARRY |       | Office Assistant |   | DATE _4-2 | 26-78 |  |
|---|-------|------------------|---|-----------|-------|--|
| (This space for Federal or State office use)  APPROVED BY                   | TITLE |                  | A | PPRO      | OVED  |  |
| CONDITIONS OF APPROVAL, IF ANY:   |       |                  |   | AUG 8     | 1978  |  |

\*See Instructions on Reverse Side

(1) (NOS 15 1978

MULLIS 19 MINIMA

GBVOSSA