

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

71-032233A(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

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

1.

OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Exxon Corporation

3. ADDRESS OF OPERATOR

P. O. Box 1600, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surfaceUnit "L", 2310 FSL, 990' FWL, Sec. 29, T-18-S,
R-38-E, Lea County, New Mexico

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bower "A" Federal

9. WELL NO.

10

10. FIELD AND POOL, OR WILDCAT

Hobbs (G-SA)

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 29-18S-38E

14. PERMIT NO.

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

3649 D.F.

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Perforate & Acidize

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.)*

1. Cleaned out to 4217' PBTD.
2. Ran CNL-GR-CLL Log from 4217-3872'.
3. Acidize perforations from 4180-4192' w/1500 gal. NEACL acid.
4. Perforate 5" liner from 4051-4057' w/2 shots per foot.
5. Acidize perforations from 4051-4057' w/1500 gal. NEACL Acid.
6. Install artificial lift equipment.

RECEIVED

AUG 1 1979

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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

SIGNED

C. J. O'Connell

TITLE

Unit Head

DATE

8-29-79

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE

