WELL 2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

1. OIL

UNITED STATES OF THE INTERIOR (Other instruction) DEPARTME

SUBMIT IN TRIPLICATE*

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

LC 069276

GEOLOGICAL SURVEY							
SUNDRY	NOTICES	AND	REPORTS	ON	WELLS		

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON W (Do not use this form for proposals to drill or to deepen or plug back to a Use "APPLICATION FOR PERMIT—" for such proposals.)	different reservoir.	
OIL GAS Y OTHER	DEGELVE	SWIT AGREEMENT NAME
NAME OF OPERATOR	11//	FARM OR LEASE NAME
Pennzoil Company	DEC 29 1971	Hudson "29" Federal
ADDRESS OF OPERATOR	9.	WELL NO.
P. O. Drawer 1828, Midland, Texas 7970 LOCATION OF WELL (Report location clearly and in accordance with any State rec	2, S GEOLOGICAL SUF	7 V 🐃 '
LOCATION OF WELL (Report location clearly and in accordance with any State rec	Juhrementa BRS. NEW ME 10	FIELD AND POOL, OR WILDCAT
P. O. Drawer 1828, Midland, Texas 7970 LOCATION OF WELL (Report location clearly and in accordance with any State reconstruction of the state of th	HOBES,	Corbin, S., Morrow
660' FNL & 1980' FEL Sec. 29, T-18-S,	R-33-E	SEC., T., R., M., OR BLE. AND SURVEY OR ARBA

660' FNL & 1980' FEL Sec. 29, T-18-S, R-33-E

3799

29, T-18-S, R-33-E

12. COUNTY OR PARISH 13. STATE New Mex

16.

14. PERMIT NO.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE		PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON*		WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING X ABANDONMENT*	
REPAIR WELL (Other)		CHANGE PLANS		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	_
				at 1 to 1 to mentioned dates including estimated date of starting	a

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.) *

Treated Morrow perfs (13,218'13,340' O.A.) w/15,000 Gals 7 1/2% 12-19-77: MS acid + 150# Benzoic acid + 1,000 SCF N₂/bbl. Opened to test tanks, flowed 21 BLW in 3 1/2 hours.

No recovery overnight. Swabbed & flowed 49 BLW 8 hrs. SDFN 12-20-77: Swabbed 3 hrs., well kicked off 15 hrs. SITP 1200 psi. 12-21-77:

and flowed to test tank.

Rec. 101 BLW in 24 hrs to test tank 12-22-77: FTP 125 psi.

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

Rec. 134 BLW in 24 hrs to test tank FTP 190 psi. 12-23-77:

Rec. 55 BLW in 24 hrs 12-24-77: FTP 190 psi.

Gas rate 940 MCF down sales line, plus 20 12-25-77: FTP 200 psi. bbls. condensate, plus 25 bbls. water.

\cap \cap						
18. I hereby errify that the foregoing is true and correct	TITLE	Advanced Pet.	Engr.	DATE_	12-28-7	7
(This space for Federal or State office use				T) A MIE		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE		AC	CEPTED FO	IR RECORD	

*See Instructions on Reverse Side

U. S. GEDLUGICAL SUI HOBBS, NEW MEXICO