

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIP?
(Other instructions
verse side)

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Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 069276

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Pennzoil Company		8. FARM OR LEASE NAME Hudson "29" Federal
3. ADDRESS OF OPERATOR P. O. Drawer 1828, Midland, Texas 79702		9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 1980' FEL Section 29, T-18-S, R-33-E		10. FIELD AND POOL, OR WILDCAT Corbin, South, Morrow
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 29, T-18-S, R-33-E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3799 Gr		12. COUNTY OR PARISH Lea
		13. STATE New Mex

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)*

Estimated Starting Date: 11-28-77

Treat Morrow perforations (13,218-13,340' OH) with 15,000 gallons of 7 1/2% M.S. acid, using 1,000 SCF of N₂ per bbl and 300# of Benzoic acid flakes.

Shut in 1/2 hr. and test to tanks

11-29-77: Put production down sales line

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

SIGNED

J. Raney

TITLE

Advanced Pet. Engr.

DATE

11-17-77

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
NOV 17 1977
ANCHOR & BROWN

*See Instructions on Reverse Side