

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

5. LEASE DESIGNATION AND SERIAL NO.

LC 032233-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

BOWERS A FEDERAL

9. WELL NO.

30

10. FIELD AND POOL, OR WILDCAT

HOBBS BLINEBRY

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

S-30-T18S-R38-E

12. COUNTY OR PARISH

LEA

13. STATE

TEXAS

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 ☒ GAS ☐ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

EXXON CORPORATION

3. ADDRESS OF OPERATOR

P.O. Box 1600, MIDLAND, TEXAS 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

330 FSL & 660 FEL

14. PERMIT NO.

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

3653 DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☒

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☐

CHANGE PLANS

☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

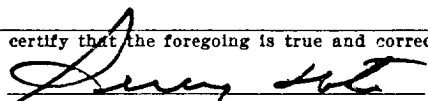
(Other)

(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 perti-
nent to this work.)*

PULL RODS & TBG. USE CSG. JET GUN, PERF THE FOLLOWING AT 1 SPF.
5747-5762, 16 SHOTS, 5766-5772, 7 SHOTS, 5794-5810, 17 SHOTS,
5821-5824, 4 SHOTS, 5834-5838, 5 SHOTS. RUN RETRIEVABLE BRIDGE PLUG &
TREATING PRR. SET BP @ 5844 & PRESS. TEST. RESET PKR @ 5782 AND ACIDIZE
PERFS 5794-5838 W/3000 GALS. 15% NE HCl ACID CONTAINING 3 GALS COREXIT
7652. BREAKDOWN PERF. THEN DISPLACE ACID TO 2500 PSI MAX. SURF. PUMP PRESS.
OVERFLUSH ACID W/30 BBLs. CLEAN BRINE CONTAINING 1 GAL COREXIT 7652. IF PERF.
5794-5838 COMMUNICATE W/PERFS. 5747-5772 RESET PKR TO 5720 AND ACIDIZE ALL PERFS.
W/5500 GALS 15% NE HCl CONTAINING 5 GALS COREXIT 7652. ADD 0.2 LBS. BENZOIL
ACID FLAKES/GAL TO LAST 3000 GALS. OF ACID. RESET BP AT 5782 AND PKR AT 5720.
ACIDIZE PERFS. 5747-5772 W/2500 GALS. 15% NE HCl ACID CONTAINING 3 GALS.
COREXIT 7652. BREAKDOWN PERFS. THEN DISPLACE ACID TO 2500 PSI MAXIMUM
SURFACE PUMP PRESS. OVER FLUSH ACID W/20 BBLs. CLEAN BRINE CONTAINING
1 GAL COREXIT 7652. PULL BP & PKR. AND PLACE WELL ON PRODUCTION

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

SIGNED



TITLE

SECTION HEAD

DATE

4-29-75

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE

*See Instructions on Reverse Side

MAY 2 1975

JUN 1 1975

JUN 1 1975