

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 25458	
2. NAME OF OPERATOR PETROLEUM DEVELOPMENT CORPORATION		6. IF INDIAN, ALLOTTEE OR TRIBE NAME --	
3. ADDRESS OF OPERATOR 9720 B Candelaria NE, Albuquerque, NM 87112		7. UNIT AGREEMENT NAME --	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  660' FSL, 1980' FWL		8. FARM OR LEASE NAME Gulf-McKay Federal	
14. PERMIT NO. --		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3697 GL		10. FIELD AND POOL, OR WILDCAT Querecho Plains Bone Springs	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34, T18S, R32E	
		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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <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.) \*

5/2/80 thru 9/30/80:

Set blanking plug and packer @ 12,576'. Dumped 5 sx. 20 mesh sand on packer. Perforated 8852' with 4JHPF. Set cement retainer @ 8796'. Cemented with 300 sx. Class "H" cement. Perforated 8503-13 and 8528-35 with 2JHPF. Swabbed dry. Acidized with 2000 gallons 15% MSR acid. Swabbed intermittently once a month. 10/1/80: Tubing pressure: 100#; casing pressure: 270#. First fluid level, 6300'. Swabbed 12 bbls. oil, 56 bbls. water. Casing pressure 240#. FL 7800'. SION.

Preparing to install pumping equipment.

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

SIGNED Charlotte Johnson TITLE Secretary DATE 9/30/80

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DATE OCT 6 1980

U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

cc: WIO 10/1/80.

\*See Instructions on Reverse Side