

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 12413A
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  1730' FWL, 1850' FNL		8. FARM OR LEASE NAME Sun-McKay Federal
14. PERMIT NO. --		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3658 GL		10. FIELD AND POOL, OR WILDCAT East Lusk Wolfcamp
S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10, T19S, R32E
		12. COUNTY OR PARISH Lea
		13. STATE New Mexico

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) <u>Morrow recompletion</u> <input checked="" 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.) \*

Operations to recomplete in the Morrow have been cancelled. It was found that the tubing was plugged with paraffin and after the paraffin was cut, the well started producing an average of 20 barrels of oil per day in the Wolfcamp.

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:

cc: WIO 9/30/80.

\*See Instructions on Reverse Side

ACCEPTED FOR RECORD  
DATE  
OCT 6 1980  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO