Form 9-331

(May 1963)	DEPARTM TOF THE INTERIOR (Other Instructi	on re- Budge	t Bureau No. 42-F.1424. NATION AND SERIAL NO.
	GEOLOGICAL SURVEY	NM 05	_
	SUNDRY NOTICES AND REPORTS ON WELLS		LLOTTEE OR TRIBE NAME
(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 (V)	GAS	7. UNIT AGREEM	ENT NAME
WELL [A]	WELL OTHER		
2. NAME OF OPE		8. FARM OR LEA	
Pennzoil United, Inc. 3. ADDRESS OF OPERATOR			<u>ero Ridge Unit</u>
	P. O. Drawer 1828 - Midland, Texas	9. WELL NO.	
4. LOCATION OF See also spac At surface	WELL (Report location clearly and in accordance with any State requirements.*		onatod
2310 FSL & 1800 FEL of Sec. 35, T-19-S, R-34-E			M., OR BLK. AND
14. PERMIT NO.	L. T. Brett prove (Ch		5, T-19-S, R-34-E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)		PARISH 13. STATE
	3707.4 GL	Lea	I N. M.
16.	Check Appropriate Box To Indicate Nature of Notice, Rep	ort, or Other Data	
	NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:	
TEST WATER	SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	REPA	IRING WELL
FRACTURE TE	REAT MULTIPLE COMPLETE FRACTURE TREATM	NT ALTE	RING CASING
SHOOT OR AC	CIDIZE X ABANDON* SHOOTING OR ACID	ZING ABAN	DONMENT*
REPAIR WELL		t recults of multiple cover	Notion on Wall
(Other)	relitorate Completion of	t results of multiple comp Recompletion Report and	Log form.)
17. DESCRIBE PRO proposed v nent to this	POSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertineork. If well is directionally drilled, give subsurface locations and measured and t s work.)*	nt dates, including estima ne vertical depths for all i	ted date of starting any markers and zones perti-
1-27-70	Acidize & perforate 10,190 - 196'	1 s. • = • =	
1-30-70	Plug back from Bone Spring to Bone Spring		
1-31-70	Perforate		
2-5-70	Re-acidize		
2-5-70	Potential test	*	
		, e. %	
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18. I hereby certify that the foregoing is true and correct SIGNED	TITLE _	Petroleum Engineer	рате 2-10-70
(This space for Federal or State office use)	TITLE	APPROVED	DATE
CONDITIONS OF APPROVAL, IF ANY: *Se	e Instructi	FEB 11 1970 ARTHUR R. BROWN ONS ON REVERSE STATEMENT ENGINEER	