

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 GAS WELL OTHER

2. NAME OF OPERATOR
Pennzoil Company

3. ADDRESS OF OPERATOR
P. O. Drawer 1828, Midland, TX 79702-1828

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
554' FEL & FSL of Sec. 35, T-19-S, R-34-E

14. PERMIT NO. API #30-025-23503

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3700.5 GL

5. LEASE DESIGNATION AND SERIAL NO.
NM-052

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Mescalero Ridge Unit

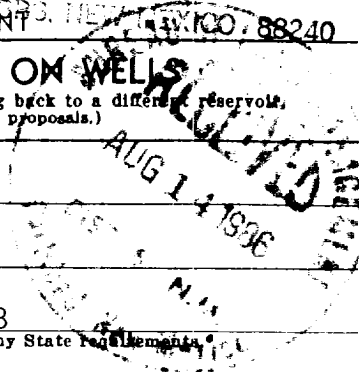
9. WELL NO.
3

10. FIELD AND POOL, OR WILDCAT
Lea Bone Spring

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 35, T-19-S, R-34-E

12. COUNTY OR PARISH
Lea

13. STATE
NM



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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)*
- 7-10-86 Commenced workover. Swab tested existing lower perfs @ 10,155'-10,169'.
 - 7-12-86 Set 4 1/2" CIBP @ 9,800' w/ 35' cement on top. New PBSD @ 9,765'.
 - 7-13-86 Swab tested existing upper perfs @ 9,611'-9,636'.
 - 7-15-86 Set 4 1/2" CIBP @ 9,575' w/ 35' cement on top. New PBSD @ 9,540'. Spotted 100 gals 10% acetic acid @ 9,450'-9,300'. Perfed @ 9,399'-9,453' with 30 holes.
 - 7-17-86 Acidized new perfs w/ 3000 gals 15% HCl NeFe + 60 ball sealers.
 - 7-18-86 to 8-5-86 Swab tested. Placed on pump. Pump tested.
 - 8-6-86 to 8-8-86 SI for buildup.
 - 8-9-86 Completed testing and evaluation of Bone Spring. WO permit to abandon Bone Spring and recomplete in Delaware.

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

SIGNED Francis P. Rodriguez TITLE Adv. Engr. Tech. DATE 8-13-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PP
AUG 21 1986

*See Instructions on Reverse Side

RECEIVED
AUG 25 1986
C. C. C.
HOBBS OFFICE