## Form Approved. Budget Bureau No. 42-R1424

UNITED STATES					
DEPARTMENT OF THE INTERIOR					
GEOLOGICAL SURVEY					

	OMITED	SIMIES		1,142
	DEPARTMENT O	F THE INTERIOR		5. LEASE
GEOLOGICAL SURVEY				LC 068037
			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
SUNDRY (Do not use this reservoir, Use For	NOTICES ANI form for proposals to dri m 9-331-C for such prop	D REPORTS ON WELL ill or to deepen or plug back to a diff posals.)	S ferent	7. UNIT AGREEMENT NAME
1. oil well	gas well othe			8. FARM OR LEASE NAME Mescalero "29" Fed. Com
2. NAME OF Pennzoi				9. WELL NO. 1
3. ADDRESS	OF OPERATOR	lland, TX 79702		10. FIELD OR WILDCAT NAME Quail Ridge Morrow
<ol> <li>LOCATION below.)</li> </ol>	OF WELL (REPORT I	LOCATION CLEARLY. See space	2 17	11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA
AT TUP PE	CE: 1980' FSL ROD. INTERVAL:	& 1650' FWL Same	-	Sec. 29, T19S, R34E  12. COUNTY OR PARISH 13. STATE
AT TOTAL  16. CHECK API	PROPRIATE BOX TO	Same INDICATE NATURE OF NOTI		Lea New Mexico
KEI OKI, O	N OTHER DATA	MOIONE NATURE OF NOTE	CE,	30-025-28283 15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR		SUBSEQUENT REPORT OF:	L	3668.7 GR
TEST WATER S FRACTURE TRE SHOOT OR ACI REPAIR WELL PULL OR ALTEI MULTIPLE COM	AT			(NOTE: Report results of multiple completion or zone change on Form 9-330.)
CHANGE ZONES		H		
ABANDON*	П	H		
(other)				
17. DESCRIBE Findluding es measured at 2-27-85	id tide vertical depths	PLETED OPERATIONS (Clearly sing any proposed work. If well is for all markers and zones pertinal perfs in Morrow z	inent t	
	13,0/3-82' ()	2 SPF - 19 holes)		
	13,20/-/0' ()	2 SPF - 7 holes)		
	13,276-82' ()	2 SPF - 13 holes) 2 SPF - 21 holes)		
	20,002 12 (2	2 3FT - 21 NOTES)		
		on production. Daily DMCF, 20 BO, & 20 BW MCF, 55 BO, & 9 BW.	pro D	duction prior to additional aily production w/ additional
Subsurface Safety	Valve: Manu. and Ty	pe		Set @ Ft.
18. I hereby certify that the foregoing is true and correct			1	
SIGNED	- V Vlade	TITLE Engr. Asst.	• ———	_ DATE _ 3-5-85
		(This space for Endown as St. )		
APPROVED BY CONDITIONS OF AP	PROVAL, IF ANY: A	ECOSD TITLE		DATE
	MAD 1 2 100			
	1 17 6 5 4 7 2 11 11 11 11 11	'e.		

\*See Instructions on Reverse Side

RECEIVED

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CO.