

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRI.
(Other instructions
reverse side)DATE
n reForm approved.
Budget Bureau No. 42-B1424

5. LEASE DESIGNATION AND SERIAL NO.

NM 06531 A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Lea Unit

8. FARM OR LEASE NAME

Lea Unit

9. WELL NO.

4

10. FIELD AND POOL, OR WELD AT

Lea Pennsylvanian

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 11-20S-34E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

1.

OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Marathon Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 220, Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980 FNL and 660 FEL

14. PERMIT NO.

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

DF 3676'

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Aband. Bone Springs, recompl.
in Bend Gas zone & treat Dev.

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

Plan to set retrievable bridge plug at approximately 10,250', and squeeze cement Bone Springs perforations at 9590-9620' and 10,168-10,176'. Will drill out cement to bridge plug and move and reset it at approximately 13,100'. Plan to perforate the Bend gas section 12,853-12,863' and 12,953-12,965' and acidize the same. Will acidize the Devonian Zone with approximately 4000 gals. acid.

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

SIGNED

P. A. Hilda Jr.

TITLE

Area Supt.

DATE

10-6-69

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side