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.)	6. IF INDIAN, ALLOTTEE OF TRIBE NAME Not	
OIL WELL OTHER	7. UNIT AGREEMENT NAME Lea Unit	
2. NAME OF OPERATOR  Marathon Oil Company	8. FARM OR LEASE NAME Lea Unit	
3. ADDRESS OF OPERATOR Box 220 Hobbs, New Mexico	9. WELL NO.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	Lea Devonian and Lea Penn	
1980' FSL and 1980' FEL of Section 12	11. SEC., T., R., M., OR BLK, AND SURVEY OR AREA SEC 12, Twp 20S, Rge 3LE	
14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  3665 CR	12. COUNTY OR PARISH 13, STATE Lea New Mexico	

(Other)

(Other)

(Other)

(Other)

(Other)

(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.)\*

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING X

NOTICE OF INTENTION TO:

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE PLANS

TEST WATER SHUT-OFF

FRACTURE TREAT

REPAIR WELL

The Bone Springs oil section perforations in the 7" casing were squeezed off at 10226-34! using 150 sacks Trinity Inferno coment. Tested the squeezed interval with 1500# for 30 minutes and held 0.K. The 7" casing was perforated in the Penn gas section from 12911-60! with 88 jet shots. Dual production equipment run. Well now a Devonian oil - Penn gas dual. Packer leakage test conducted. There were no indications of communications between the zones. The Penn section was not treated.

18. I hereby country that the foregoing is true and correct	TITLE	Area Supt.	DATE 6-25-65
(This space for Federal or State office use)			
APPROVED BY	TITLE		APPROMED

SUBSEQUENT REPORT OF:

(Other) Recomplete in Penn gas zone

REPAIRING WELL

ALTERING CASING