NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		
U.S.G.S.		5a, Indicate Type of Lease
LAND OFFICE		State Fee. X
OPERATOR		5, State Oil & Gas Lease No.
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 —" (FORM C-101) FOR SUCH PROPOSALS.)		
l.	<b>a</b> 0.3 D 3	7. Unit Agreement Name
WELL WELL	other- Gas-Oil Dual	8. Farm or Lease Name
2. Name of Operator		
Amerada Petroleum Corporation  3. Address of Operator		Fred Turner Jr. "A"
		9. 11 110.
P.O. Box 668 - Hobbs, New Mexico		10. Field and Pool, or Wildcat
UNIT LETTER,	1980 FEET FROM THE South LINE AND 1987 FEET	FROM
	44	
THE MASE LINE, SEC	TION 18 TOWNSHIP 20S RANGE 38E	IMPM. (
mmmmm	15. Elevation (Show whether DF, RT, GR, etc.)	12, County
	3562' DF	I.ee ()
16. Charl	k Appropriate Box To Indicate Nature of Notice, Report of	
		JENT REPORT OF:
Notice of	THE LATION TO.	PENT REPORT OF.
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	PEOG AND ABANDONMENT
POLE ON ACTUR GASING	OTHER	'
OTHER		
17. Describe Proposed or Completed work) SEE RULE 1103.	Operations (Clearly state all pertinent details, and give pertinent dates, incl	uding estimated date of starting any proposed
<i>2611)</i> 322 NO22 11001		
This report f	or Eument zone only	
_	pump and 1-1/2" tubing. Set blanking plug in	seating ninnle
at 3701 . Op	ened PSI sliding sleeve & circulated fresh wat	er down 3" tubing.
Acidized Bume	nt sene perferations 3145' to 3494' with 2000	gals. 15% acid
	iseal added. Swabbed acid water. Flowed gas	
	ed sliding sleeve and pulled blanking plug. R	
	and pump and resumed production.	•
No change in	well classification or producing status.	
9		
18. I hereby certify that the informati	ion above is true and complete to the best of my knowledge and belief.	
	-	
SEN. DA	Maria a Carrier	4 48 /4
SIGNED	TITLE District Superintenden	t DATE

CONDITIONS OF APPROVAL, IF ANTE.