

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN ORIGINAL
OTHER THAN THIS FORM
SEE INSTRUCTIONS

Form approved
Budget Bureau No. 12 R1424
LEASE DESIGNATION AND SERIAL NO.

LC 032591 (a)

IF INDIAN, ALLOTTEE OR TRIBE NAME

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 purposes.)

OIL WELL ☐ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Sun Oil Co.

3. ADDRESS OF OPERATOR

Box 1861 Midland TX 79702

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

2030/N 330/E

RECEIVED
DEC 15 1978

14. PERMIT NO.

15. ELEVATION (Show whether DE, RT, GS, etc.)

3948 DF

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7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Elliott -A-

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Blinebry Oil

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

*Sec 21, T21S, R37E
Unit H*

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

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

NOTICE OF INTENTION TO

TEST WATER SHUT-OFF

REPAIR OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

☒

CHANGE PLANS

(Other) *Rep. Csg. Leak & Add Perfs*

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Give in detail 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.) *

1. MIRU, install BOP, POH, Run 4 3/4 bit to 5234, tag fill.
2. Clean hole, POH, Perf.
3. Test.

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

SIGNED

Carson Minter

TITLE *Prod. Staff Associate*

DATE

2-12-78

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DEC 21 1978

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*See Instructions on Reverse Side