## UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY  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 Form 9-331-C for such proposals.  Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.  Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.  Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.  S. FARM OR LEASE NAME  Elliot A-15  9. WELL NO.  10. FIELD OR WILDCAT NAME  Paddock  11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA  Sec. 15, T-22-S, R-37-F.  12. COUNTY OR PARISH. 13. STATE  Lea New Mexico  14. API NO.  REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF FRACTURE TREAT  SHOOT OR ACIDIZE  REPAIR WELL  (NOTE: Report results of multiple completion or zone)	Form 9-331 Dec. 1973	Form Approved. Budget Bureau No. 42–R1424
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 from 5-31-C for such proposals.)  1. cil		5. LEASE
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Well Mell other  2. NAME OF OPERATOR  Sun Exploration & Production Co  3. ADDRESS OF OPERATOR  P. O. Box 1861, Midland, Texas 79702  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 helow).  AT SURFACE:Unit Ltr. J, 1650' FSL & 2310' FEL AT TOP PROD. INTERVAL: AT TOP PROD. INTERVAL: AT TOP AROUNT OR OTHER DATA  REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL  WELL OMPLETE ABANDON' Gother)  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.)'  1. MIRU Load Tbg. 2. Preflush w/30 bbls 2% KCL Water down casing 3. Mix 2 drums Trecolite SP 260-E, 5 Gals RP 2336 & 20 bbls 2% KCL Water 4. Pump Chemical Mix down casing 5. Overflush 150 bbls 2% KCL Water 6. Shut well in 24 Hours 7. POP 8. *NOTE: Residuals will be checked monthly by Tretolite  Subsurface Safety Valve: Manu, and Type  Set @ File  III. Ihereby certify that the foregoing is true and correct	reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
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APPROVED TO APPROVAL, IF ANY:	1-9-85	