UNITED STAILS DEPARTMENT OF THE INTERIOR GFOLOGICAL SURVEY

	LC -	٥3	04	67	'	(4)	
6.	IF INDIAN	ALL	OTTEE	OR:	TRIBE	NAM	F

5. LEASE

GEOLOGICAL SURVEY	6. 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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME Nm FU 8. FARM OR LEASE NAME			
1. oil gas well other	VAUGHN A-12 9. WELL NO.			
2. NAME OF OPERATOR	2			
3. ADDRESS OF OPERATOR BOX 460, HOBBS, NM 88240	10. FIELD OR WILDCAT NAME LANGLIE MATTIX 11. SEC., T., R., M., OR BLK. AND SURVEY OR			
4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 below.)	SEC 12 1-245 R.36E			
AT SURFACE: GGO FNL 300/10 AT TOP PROD. INTERVAL: SAME	12. COUNTY OR PARISH 13. STATE			
AT TOTAL DEPTH: SAME	14. API NO.			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)			
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3345' GR			
TEST WATER SHUT-OFF				
SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING	(C)/(NOTE: Report results of multiple completion or zone change on Form 9–330.)			
MULTIPLE COMPLETE CHANGE ZONES	change on Form 9-350.)			
ABANDON* (other) PERF: TREAT (SUBSÉQUENT	REPORT)			
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner	irectionally drilled, give subsurface locations and			
<u> </u>	ACID FROM 3630-3380			
PERF 3454, 3456, 3458, 3474,	3494, 3528, 3536,			
3538, 3544, 3588, 3599, 3602	W/2 JSPF. WIH W/			
278" TBG : PKR SET @ 3294	! TREAT PERFS W/			
2000 GALS 15% HCL-NE ACII	W/ ANTI-SLUDGE F			
IRON SEQUEST AGENT @ 8 BO	om. FORM BREAK DN			
@ 3700 PSI. PUT ACID AWAY	0 8 Bpm @ 2900 PSI			
8 3700 PSI. PUT ACID AWAY ISIP 900 PSI, WELL ON VACO SHUT WELL IN 2 HRS. SW	OUM AFTER 3 MIN.			
SHUT WELL IN 2 HRS. 5W Subsurface Safety Valve: Manu. and Type	ABBED DRY. Set @Ft.			
18. I hereby certify that the foregoing is true and correct SIGNED TITLE ADMIN. —	SUPV.DATE 11-14-77			
(This space for Federal or State of	TO END KELUND			
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	PACCEPIED 1011			
*See Instructions on Reverse	THE GEOMETIN MENTS			

USGS-6, NMFU-4, File

