

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions reverse side)

COPY TO B. E. S.

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-036249

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

PORTLAND MYERS UNIT

8. FARM OR LEASE NAME

" " "

9. WELL NO.

A

10. FIELD AND POOL, OR WILDCAT

LANGLEY-MATTIX-OIL

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

22-24-37 NMPM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3240' GL

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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

In an effort to remove possible wellbore damage and increase productivity propose to treat formation w/ apH. 1000 gal scale converter and 1000 gal 15% NEFE acid. Evaluate & restore to production.

Prod- Pmp 11 BOX 70BW 24 RAS.

TD- 3565'

5 1/2" CSA 3360'

OPEN HOLE 3360'- 3565'

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

SIGNED

Roy R. Yorkum

TITLE ADMINISTRATIVE ASSISTANT

DATE AUG 6 1975

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

AUG 8 1975

ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side

24- USGS- H
1- DIR
1- SUSP
1- RRY