Form 9-331 (May 1962)

UI LED STATES SUBMIT IN TRIPLE.CEE® (Other instructions on reverse side)

'GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM #025559

6 T1	P INDIAN	LIOTT	EF OF	2 TR	PT.	NAME

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals a Giller (Ediphyorphu pack to a different reservoir. Use "APPLICATION FOR PERSOTI" for such proposals.)	b. IF INDIAN, ALLOTTEE OR TRIBE NAME		
t,	7. UNIT AGREEMENT NAME		
WELL X WELL OTHER MAY 4 1976	S. FARM OR LEASE NAME		
2. NAME OF OPERATOR DAVID C. COLLIER OF THE COLLIE	FEDERAL 13		
DAVID C. COLLIER V O. C. G. 3. ADDRESS OF OPERATOR ARTESIA, OFFICE	9. WELL NO.		
P. O. BOX 798, ARTESIA NM 88210	2-		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)	10. FIRLD AND POOL, OR WILDCAT		
At surface	EAST BENSON YATES 11. SEC., T., R., M., OR BLK. AND		
1650' FNL & 1750' FWL	SURVEY OR ARMA		
	Se. 13 19S 30E		
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	EDDY NEW MEX.		
DATED JAN. 1961 3419 DF			
16. Check Appropriate Box To Indicate Nature of Notice, Report, or C			
NOTICE OF INTENTION TO:	UENT REPORT OF:		
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	REPAIRING WELL		
FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT SHOOTING OR ACIDIZING	ALTERING CASING ABANDONMENT*		
SHOOT OR ACTORES (Other) PUT WELL	ON PRODUCTION X		
(Note: Report results	s of multiple completion on Well pletion Report and Log form.)		
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates proposed work. If well is directionally drilled, give subsurface locations and measured and true vertice.	s, including estimated date of starting any		
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RECE	IVED		
MAY - S	3 19 76		
U. S. GEOLOGI Artesia, Ne			
REQUEST ALLOWABLE OF 2 BARRELS OF OIL PER DAY.			
18. I hereby certify that the foregoing is true and correct			
SIGNED G. Wilson TITLE Agent	DATE April 30, 1976		
(This space for Federal of Styte office use)			
ADDITIONS OF APPROVAL, IF ANY:	I)ATE		
3-137			
*See Instructions on Reverse Side ACTING DISTRICT ENGINEER			