			C : S
Form 9-331 (May 1963)	UN. ED STATES	SUBMIT IN TRIPATE*	Form approved. Budget Bureau No. 42-R1424
DEPAR	TMENT OF THE INTERI	IOR verse side)	5. LEASE DESIGNATION AND SERIAL NO.
	GEOLOGICAL SURVEY		NM 32636
	TICES AND REPORTS (posals to drill or to deepen or plant to deepen or		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1.			7. UNIT AGREEMENT NAME
OIL GAS X OTHER		nfc 3 - 1979	
2. NAME OF OPERATOR		DEO O 19. 9	8. FARM OR LEASE NAME
Delta Drilling Compar	ıy 💆	0.00	Amoco Federal
3. ADDRESS OF OPERATOR		ARTESIA, OFFICE	9. WELL NO.
P. O. Box 3467, Midla			1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)			10. FIELD AND POOL, OR WILDCAT
At surface			Wildcat Morrow
1980 FSL & 990 FEL			11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
			G 11 m 22 G D 20 D
14. PERMIT NO.	15. ELEVATIONS (Show whether DF	I DM OD 440	Sec 11, T-23-S, R-28-E
14. PERMIT NO.	2992.1 G	· · · · · · · · · · · · · · · · · · ·	1 .
			Eddy New Mexic
16. Check A	Appropriate Box To Indicate N	lature of Notice, Report, or (Other Data
NOTICE OF INT	ENTION TO:	SUBSEQ	UENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other) Perforation	
(Other)		(Nore: Report results Completion or Recomp	of multiple completion on Well letion Report and Log form.)
17. DESCRIBE PROPOSED OR COMPLETED Of proposed work. If well is direct nent to this work.) *	PERATIONS (Clearly state all pertinen stionally drilled, give subsurface locat	t details, and give pertinent dates tions and measured and true vertic	, including estimated date of starting an al depths for all markers and zones perti
with EOT at 11423'.	. Ran 374 joints 2-7/ Perforated 2 SPF at 1 Total of 26 3/10" sh	1604, 05, 06, 07, 08,	
	R		
		NOV 2 9 1073	
). GEULURICAL SUM EY Rtesia, New Mexico	
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APPROVED BYCONDITIONS OF APPROVAL. IF ANY:	TITLE	DATE	
(This space for Federal or State office use)	TITLE TO DISTRICT FOR THE	NOA ⊼ a 1a√a	
SIGNED CON Sucur. Brown	TITLE Field Projects Manager	DATE 11/28/79	
8. I hereby certify that the laregoing is true and correct			