Form 9-331 (May 1963)

NITED STATES

SUBMIT IN T. ICATE*
(Other instructions on re-

Form approved. Budget Bureau No. 42-R1424.

DEPARTMENT OF THE INTERIOR verse side) GEOLOGICAL SURVEY			5. LEASE DESIGNATION AND SERIAL NO. NI: 050200-A
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 "APPLICATION FOR PERMIT—" for such proposals.)			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
I. OIL [] GAS [V]			7. UNIT AGREEMENT NAME
WELL WELL A OTHER 2. NAME OF OPERATOR			8. FARM OR LEASE NAME
SINCLAIR OIL CORPORATION			Guadalupe Ridge Unit
3. ADDRESS OF OPERATOR			9. WELL NO.
P. O. Box 1920, Hobbs, New Exico 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			10. FIELD AND FOOL, OR WILDCAT
See also space 17 below.) At surface			Wildcat
1980' from the West line and 660' from the North line.			11. SEC., T., E., M., OR ELK. AND SURVEY OR AREA
			22-T26S-R21E
PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			12. COUNTY OR PARISH 13. STATE Eddy New Nexico
16. Chec	k Appropriate Box To Indicate N	ature of Notice, Report, o	or Other Data
	INTENTION TO:		SEQUENT 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		ement 8-5/8"CD Csg. X sults of multiple completion on Well
(Other)	FD OPERATIONS (Clearly state all portinger	Completion or Rec	ompletion Report and Log form)
proposed work. If well is a nent to this work.) *	directionally drilled, give subsurface locati	ons and measured and true ve	ates, including estimated date of starting any ertical depths for all markers and zones perti-
11-3-68 Ran D.F. t tested O.K		st BCP and 8-5/8"C it to 2102' and pre	DD casing to 2000" for 30" essure tested 8-5/8"CD casing
		20	
	3 4 T	2	
	1		
18. I hereby certify that the forego	oing is true and correct		
SIGNED		rerintendent	DATE 11-168
(This space for Federal or Sta	te office ise)		-6
APPROVED BY	TITLE		DODANI FO
CONDITIONS OF APPROVAL,		X	DOK
Orig&4cc: USGS, Ar		4	
cc: Mrs. H. cc: Partners	M. Rhea, Santa F., N.M. *See Instructions		J. DuAN
cc: Regional		on hereise side	ARL BE

Regional Office file