•	cor.	
1	m 9-331	
	(May 1963)	

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

UNITED STATES SUBMIT IN TRIPLICATE* Other instructions on reverse side)

Form approved.

	-unger				
LEASE	DESIGN	7981 1896	AND	SERIAL	NO

REPAIRING WELL

ALTERING CASING

Surface Casing

G	NG-5981		
SUNDRY NOTI	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
OIL GAS WELL OTHER		7. UNIT AGREEMENT NAM	110
_	L. Ludwick	8. FARM OR LEASE NAME Star L	
S. ADDRESS OF CLERKION	Dox 70 naton, New Mexico 87401	9. WELL NO.	
See also space 17 below.) At surface	early and in accordance with any State requirements.*	10. FIELD AND POOL, OR	
لۆ ر 2	.0°A, 2310°A	11. SEC., T., R., M., OR BI SURVEY OR ARBA Sec. 35, 120	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF RT, QR, etc.)	12. COUNTY OR PARISH	13. STATE
16. Check Ap	propriate Box To Indicate Nature of Notice, Report, o	or Other Data	
NOTICE OF INTEN	TION TO: SUB	SEQUENT REPORT OF:	·

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) 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.)*

WATER SHUT-OFF

SHOOTING OR ACIDIZING

Spud 4-24-1979

Ran 3 jts, 8-5/8 casing, 20%, H-40,

set 3 97°, cemented 92 sacks.

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

class 'b', 2% CaCl, circulated.

Flug down 6:30 P.M.



			No.	
18. I hereby certify that the foregoing is true and correct Original Signed By: SIGNED CLAUDE C. KENNEDY	TITLE	Agent	DATE	5-2-1979
(This space for Federal or State office 1930)				
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE		DATE	I V is

*See Instructions on Reverse Side

MAY 22 1979