Form 9-331 (May 1963)

SUBMIT IN TRIPLICATE* (Other instructions on re-**UNITED STATES**

DEPARTMENT OF	THE INTERIOR	(Other instructions or verse side)	а

GEOLOGICAL SURVEY			- ONTRACT NO.16
SUNDRY NOTICES AND REPORTS ON WELLS			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.			1
Use "Al	PPLICATION FOR PERMIT—" for such r	proposals.)	VICARILLA HPACHE
OIL GAS			7. UNIT AGREEMENT NAME
	HER		
. NAME OF OPERATOR	0		8. FARM OR LEASE NAME
CONTINENTAL OIL COMPANY			HXI APACHE G
. ADDRESS OF OPERATOR	1 (72	773 /	9. WELL NO.
Dox 460, H	FOBBS. N.M. 8	8240	2
. LOCATION OF WELL (Report loc See also space 17 below.)	ation clearly and in accordance with any	State requirements.*	10. FIBLD AND FOOL, OR WILDCAT
At surface			SICARILLA - BALLARI
97311	990' FEL OF SE	. 7	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
823 ENZE	790 FEL OF SE	<i>C.</i> /	0 200 100
			SEC. 1, 1-23N, K-SW
4. PERMIT NO.	15. ELEVATIONS (Show whether D	F, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	6749 6	R.	KID FIRRIBA N.M.
S. Char	ck Appropriate Box To Indicate I	Nation Donort or	Other Date
Cued	ik Appropriate box to indicate i	, , ,	•
NOTICE OF	INTENTION TO:	SUBSE	QUENT 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)	
(Other)		(Note: Report result Completion or Recon	ts of multiple completion on Well apletion Report and Log form.)
7. DESCRIBE PROPOSED OR COMPLET	ED OPERATIONS (Clearly state all pertiner	it details, and give pertinent date	es, including estimated date of starting any ical depths for all markers and zones perti-
nent to this work.) *	directionally diffied, give subsdifface loca	tions and measured and true vert	ical depths for an markers and zones perti-
/ //	/ / /	202 02/1	1/2010/11/25
Spotted CPM	pent plug from	1802244	80 2019 W/23
		- /	
SAUES CIASS	H CEMENT. Y	/UG 1500 -11	100 W/50 sacks
Class A can	nent. Cut off	C'I "CASING	(d) 276 & Set
CIBSS II LEN	ien, cui of	2/2 601/19	
,	/ /		6 - 61
15 sacks 1	cement plug à	199 to Sur	wee. set
. / /	a la Osur	lace & vector	el as Near BS
regulation	Marker @ 3477	the crestor	ed as Near as
		1.1.	
anscible b	original co	Ndition.	
1.0331018 70		1001110	
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			<i></i>
		$\sqrt{\zeta}$	
Y humber counties (1-4 at 1-	Non to touch on the comment		
. I hereby certify that the foreg	ong is true and correct	6 1	121121
SIGNED JAMES	TITLE _	R. HNALYST	DATE
(This space for Federal or Str	ote office use)		
fruis space for Equital of Mil	the cause use;		
APPROVED BY	TITLE		DATE
CONDITIONS OF APPROVAL	, IF ANY:	•	

USES (Durango)-7, File

*See Instructions on Reverse Side