Person	9-831
Way	1962

## **UNITED STATES** DEPARTMENT OF THE INTERIOR (Other Instructions on verse side)

SUBMIT IN TRIPLICATES

	Form a Budget	Buren	L I No.	42-00	-
EASE	DESIGN.	ATTON A	ND 81	BIAL T	ō.

5.	LEASE	DESIGNATION	AND	SBRIAL	ı
	Cor	ntract	37	3	

6. IF INDIAN, ALLOTTER OR TRIBE NAME

GEOLOGICAL SURVEY					
SUNDRY	NOTICES	AND	<b>REPORTS</b>	ON	WELLS

Use "APPLICATION FOR PERMIT—" for such proposals.)	Jicarilla .	
OIL GAS OTHER	7. UMIT MORREMENT NAME	
NAME OF OPERATOR	8. PARM OR LEASE NAME	
Refiners letroleum Corporation	Cuba Fan Am	
ADDRESS OF OPERATOR	9. WELL NO.	
1223 bank of New Mexico Bldg. Alb., AM	<i>ii</i> 1	

LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface

10. FIRED AND POOL, OR WILDCAT Five Lakes Dk. 11. asc., T., B.M., OR REE, AND STATE OF AREA P. M.

990'/SL - 16501/WL 14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7246 Gr. U.S.O.3. 1/-25-70

24-T-22N, K-3N 12. COUNTY OR PARISH 18. STATE

Sandoval

16.

2.

## Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE (	OF INTENTION TO:		SUBSEQUENT	REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF		REPAIRING WELL	1
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATME	NT .	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDON*	, SHOOTING OR ACIDIS	eing	ABANDONMENT* X	L
REPAIR WELL	CHANGE PLANS	(Other)	<del>_</del>		Γ
(Otber)		(Nors: Repor	t results of a Recompletion	multiple completion on Well is Repart and Log form.)	

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 sones pertinent to this work.)

Brill but bridge plus 4 6300!

Set 11 mks. blu 6:501-6730/

Set 65 675, 1197 to 501-5510!

9et 16 exe. 110 46301-39561

Note the research light on Cortagon of the

25 25 860 ( ) 10 ( ) 1221 121

Suco to oarles off 1 14421

OIL CON. COM DIST 3

La late top of Set 27 sks. rlug 240'-190'

Set 16 sks. (100 361-01

olean

18. I hereby certify that the foregoing is true and correct

DATE

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: TITLE Pres. L & M Ventures

11/2/75

\*See Instructions on Reverse Side

STATE COPY TO ROSVI

o <sup>11</sup> o grafetato,



