Form (May	

UNITED STATES DEPARTMENT OF THE INTERIOR (Other Instructions on reverse side) GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE.

Form approved.
Budget Bureau No. 42-111424.
5. LEASE DESIGNATION AND SPRIAL NO.

NM 043286 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.

Use "APPLICATION FOR PERMIT—" for such proposals.)

		7. UNIT AGREEMENT NAME
OIL GAS WELL OTHER		
2. NAME OF OPERATOR	10	8. FARM OR LEASE NAME
Petro-Lewis Corporation		Fluid Power Pump
3. ADDRESS OF OPERATOR		9. WELL NO.
P.O. Box 2250, Denver, Colorado 80202	requirements 1000	#2
 LOCATION OF WELL (Report location clearly and in accordance with any Sta See also space 17 below.) 	A containing the cont	10. FIELD AND POOL, OR WILDCAT
At surface	OIL DIST	Media Entrada
	Die .	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
		I NOMINE ON ARMA

FNL, 330' FEL, Section 15, T19N, R3W

FC. 15, T19N, R3W 12. COUNTY OR PARISH 13. STATE

14 PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6795 KB

 N_M Sandoval

16.

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

NOTICE OF INTENTION TO:		SUBSEQUENT RELOAT 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) Convert to water injection (Nore: Report results of multiple completion on Wel Completion or Recompletion Report and Log form.)					nitiple completion on Well Report 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 zones pertinent to this work.) *

It is proposed to convert well to water injection in accordance with State of New Mexico Oil Conservation Commission Order R-5017 dated May 22, 1975. Injection will be through internally plastic coated tubing with packer set above perforations, and inert fluid displaced above packer.

18. I hereby certify that the foregoing is true Area Manager TITLE Minerals Management Incharm __ 10-3-75 (This space for Federal or State office use) DATE APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY: