| Form 9-331 (May 1963) | UNI | TED STATES | SUBMIT IN TRIPLICATE* | | ureau No. 42-R1424. |
|---|---|-------------------------------|--|--|---|
| | DEPARTMENT OF THE INTERIOR (Other instructions on re- | | | 5. LEASE DESIGNATION AND SERIAL NO. | |
| | GEOL | | Contract 392 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | | |
| 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.) | | | | Jicarilla Apache | |
| OIL GAWETL GAW | ELL A OTHER | | | 7. UNIT AGREEMENT | |
| Jack A. Cole 3. ADDRESS OF OPERATOR | | | | Apache Flats 9. WELL NO. | |
| P. O. Box 191, Farmington, New Mexico 87401 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 790/N and 1850/W Sec. 34-T23N-R4W | | | | 14 10. FIELD AND POOL, OR WILDCAT Bal'lard PC ext 11. SBC., T., R., M., OR BLK. AND SURVEY OR ARBA | |
| 14. PERMIT NO. | 15. | ELEVATIONS (Show whether DI | F, RT, GR, etc.) | Sec. 34-T2 12. COUNTY OR PAR Sandoval | |
| 16. | | | J. (N. D. C | | N.M. |
| 20. | NOTICE OF INTENTION T | | Nature of Notice, Report, or C | JINET DATA JENT REPORT OF: | |
| TEST WATER SI FRACTURE TREA SHOOT OR ACID REPAIR WELL (Other) | HUT-OFF PULL C | PLE COMPLETE | WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report results Completion or Recompl | REPAIRI ALTERIN ABANDO! | ion on Well |
| proposed wor nent to this w | k. If well is directionally | drilled, give subsurface locs | ot details, and give pertinent dates, stions and measured and true vertice | including estimated al depths for all man | date of starting any kers and zones perti- |
| • | Cement plug - | | | | |
| | Cement plug - | - 100-150 | | | |
| | 15 sacks of o | cement at surf | ace with marker. | | • |
| | | | | | |
| | | | | | |
| 18. I hereby certify | that the foregoing is true | #Od/correct | | | |
| signed | Tacket | | Operator | DATE _JU | ly 20, 197 |
| (This space for | Federal or State office use |) | | <u>, # - </u> | |
| APPROVED BY | OF APPROVAL, IF ANY: | TITLE | | DATE | 9 1 1978 |

JUL 2 1 1978