UNITED STATES DEPARTMENT OF THE INTERIOR

UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	SF. 081161 A
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
STINDDY NOTICES AND DEPORTS ON WELLS	7 UNIT ACRESITENT
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different	7. UNIT AGREEMENT NAME
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas usell other	SAN LUIS FEDERAL
- Strei	9. WELL NO.
2. NAME OF OPERATOR	&
3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME
	200 Min MIL
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
helow)	121#, 18N, 3W
AT SURFACE: 2278 SL - 2296 W/C AT TOP PROD. INTERVAL: 997	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH: 1006	SANDOVAL NM.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	14. API NO.
REPORT, OR OTHER DATA	
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 67496R
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	77761
TEST WATER SHUT-OFF	
SHOOT OR ACIDIZE	
REPAIR WELL MULL OR ALTER CASING T	(NOTE: Report results of multiple completion or zone
MULTIPLE COMPLETE	change on Form 9-330.)
CHANGE ZONES	
(other)	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dir measured and true vertical depths for all markers and zones pertinent	all pertinent details, and give pertinent dates, ectionally drilled, give subsurface locations and to this work.)*
Bl. M. OF	1
Delieve this well can be completed	To small Brodener
Believe this well can be completed request Remission to attempt complete	ion within ment
regulat termission to accompa	to be drawn press
codays.	RECEIV
o days.	
1	*** \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	DEP 9 A 4000 00731/1990
THE EMPROVAL EXPINES	DEC 2 4 1939 OIL COM. D
	Dier D
	Dist. 3
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
8. I hereby certify that the foregoing is true and correct	g and sent the other to
IGNED Mad Reynolds TITLE aperator	. ARREGORA
TITLE TOPPLET	DATE 108-128-190
(This space for Federal or State office	use)
PPROVED BY TITLE ONDITIONS OF APPROVAL, IF ANY:	DATE 0.000
SHOWING OF AFFROYAL, IF ANY:	U 시 등 중 기타했다.
8 10 -	Ken Townsend
NMOCD	ŁOŻ
*See Instructions on Reverse Side	• FAMILY OF