UNITED STATES DEPARTMENT OF THE INTERIOR

	Budget Bureau No. 42-R1424					
	5. LEASE	7 3	5	100		
	NM 6676			- 14 \$ E		
	6. IF INDIAN, ALLO	TTEE O	R TRII	BE NAME		
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	7. UNIT AGREEME	NT NAM	ИΕα	G G 5		
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	8. FARM OR LEASE	NAME	<u>.</u>	1 3 3		
	FEDERAL 2	9-22	-6			
	9. WELL NO.	5 D	:			
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	10. FIELD OR WILD	CAT NA	ME"	2		
	RUSTY CHA	CRA				
)	11. SEC., T., R., M.,	OR BL	K. AN	D SURVEY	OI	
, 7	AREA 3	7.7 4	د	4 2 7 3		
	SEC. 29-7	22N-	R6W			
	12. COUNTY OR PA			FATE 3		
	SANDOVAL		NE	W.MEXICO	Э	
	14. API NO.	·	-,	F # 3 #	_	
Ξ,	30-043-20	393				

GEOLOGICAL SURVEY SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a difference reservoir. Use Form 9-331-C for such proposals.) gas $\mathbf{X}\mathbf{X}$ other well well 2. NAME OF OPERATOR INTEGRATED ENERGY INC. 3. ADDRESS OF OPERATOR P.O. Box 61585 - HOUSTON, TEXAS 77208-9990 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 1 1580' FNL & 830' FWL AT SURFACE: AT TOP PROD. INTERVAL: 1580' FNL & 830' FWL AT TOTAL DEPTH: 1580' FNL & 830' FWL 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 50 6980' GR SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: 1,92 1,197 1,000 1 TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone change on Form 9-330.)... PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) change of operator

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.)*

Change of operator from Benson Mineral Group to Integrated Energy



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Subsurface Safety Valve: Manu. and Type		Set @		
Subsurface Safety valve, Mario, and Type	ے ' د	7.7	3	3
18. I hereby certify that the foregoing is true and correct	 ب		3 8	< 7
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SIGNED Milley M. Seventimulsed Perte Production Acct. DATE

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

8/23/82

.. Ft.

*See Instructions on Reverse Side

TITLE

