oksul

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

5. LEASE	7
N.M. 11446	
6. IF INDIAN, ALLOTTEE OR TRIBE NAM	E
7. UNIT AGREEMENT NAME	

GEOEGGIONE GOTTE	, = 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME			
Do not use this form for proposals to drill or to deepen or plug back to a different				
eservoir, Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME			
1 all gas	Bosco			
1. oil gas uell other	9. WELL NO.			
2. NAME OF OPERATOR	- 7			
A	10. FIELD OR WILDCAT NAME			
NOEL REYNOLDS 3. ADDRESS OF OPERATOR				
/	WILDCAT			
30x 356. FLORA VISTA, N. M. 87415	11. SEC., T., R., M., OR BLK. AND SURVEY OR			
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	1 m			
below.) 1980 75L, 1980 7. W. L.	TIN, RYW. TRYW.			
AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE			
AT TOTAL DEPTH:	SANDOVAL CO. NEW MEX!			
A CALLEDY ADDRODULED BOY TO INDICATE NATIONS OF CONTROL	_ 14. API NO.			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,				
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)			
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	6007 GR.			
TEST WATER SHUT-OFF				
FRACTURE TREAT				
SHOOT OR ACIDIZE				
REPAIR WELL	(NOTE: Report results of multiple completion or zone			
PULL OR ALTER CASING	change on Form 9-330.)			
MULTIPLE COMPLETE				
CHANGE ZONES				
(other)				
measured and true vertical depths for all markers and zones pertine opose; To Plug By Circulating C Derecting Dry Hole Marker. To fill Pits AND CLEAN UP, RE-SOAD WAY.				
Subsurface Safety Valve: Manu. and 1 rpe 18. I hereby certify that the foregoing is true and correct SIGNED Part of TITLE per all (This space for Federal or State of	DATE			
(inis space for redefal of State of	ince use;			
APPROVED BY TITLE TOTAL CONDITIONS OF APPROVAL IF ANY:	DATE			
	- DODOVED			

APPROVED

NMOCC

DISTRICT OIL & GAS SUPERVISOR

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

State or Federal office for specific instructions. Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site

REASON FOR ABANDONMENT: DRY HOLE.

CIRCULATE CEMENT FROM BOTTOM TO TOP.

NOEL REYMOLDS, OPERATOR.