UNITED STATES

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Form 9-331	U	NITED STATES	TEDIOD	Other instructions on re-	5. LEASE	DESIGNATION AND SERIAL NO.
(May 1963)	DEPARTM	ENT OF THE IN	LEKION	erse siuc)		居是自己人生 10
	GE	COLOGICAL SURVI	E Y		6. IF IND	IAN, ALLOTTEE OR TRIBE NAME
	WIDDY MOTIO	CES AND REPOR	rts on '	WELLS		
S	UNDKY NOTIC	is to drill or to deepen of	r plug back to	a different reservoir.]]	icarilla Apache
(Do not use	Use "APPLICA"	LES AND REPORT IS to drill or to deepen of FOR PERMIT—" for	- Ruen proposa	COLINE		AGREEMENT NAME COURT
1.			IŲ)	CUCIVE	3 11 2 3 7	1/2 / 2/2
OTT. (V) GA	S OTHER				FARM	OB. CHARD NAME: 7, 915
2. NAME OF OPERAT	TOR			MAY 0 4 1988	23	115 # 14 7 - 7
	p. Inc.			11111 0 21000	9. WELL	ngn heral hora long heral hora horal horal horal horal
3. ADDRESS OF OPE	RATOR		79703 O	IL CON. DIV.		- R F B 17 - 8 - 2 - 2 - 2 - 2 - 2 - 2 - 2
1012 A	lpine Mid	lland, Texas,	with any State		10. FIEI	D AND POOL, OR WILDCAT
4. LOCATION OF WI	ELL (Report location ci	learly and in accordance v		/ Digit a	\ <u></u>	o tero Galflur Es
At surface					11. 850	URVET OR ARMA 953
		IJL Section 33,	T-25-N.	R-10-W		34 25 W 40 W 3 E B
660' F	-SL & 660' Fl	T Secrion 22	,,			INTE OR PARISH 38. STATE
		15. ELEVATIONS (Show v	whether DF, RT,	JR, etc.)	1 .	ALTO NEW MEXICO
14. PERMIT NO.		15. BLEVATIONS			Rio	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
				(N. dies Donort O	Other D	torm the same and
16.	Check A	ppropriate Box To Inc	dicate Natu	re of Notice, Report, o	EQUENT REF	ore any specific of the control of t
24.	NOTICE OF INTE		l	SUBL		ARPARING WELL
		PULL OR ALTER CASING		WATER SHUT-OFF		ALTERING CASING
TEST WATER	1 1	MULTIPLE COMPLETE		FRACTURE TREATMENT	48.2	ABANDON MENT
FRACTURE TR	1 1	ABANDON*		SHOOTING OR ACIDIZING		25.42 11.10
SHOOT OR AC		OTTANOF PLANS		(Other) (Note: Report res	ults of mul	tiple commetion on Well on eport and Log form)
REPAIR WELL				Completion of Rec	ates, includi	ng estimated date of starting and
17 PARCEIRE PRO	POSED OR COMPLETED O	PERATIONS (Clearly state &	all pertinent di urface location	s and measured and true ve	Lticul debra	
proposed nent to thi	work. If well is directs work.) *	contain arms -	anle wel	l lease and com time due to a s	posed (report and log forms of the same of the sa
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*See Instructions on Reverse Side

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