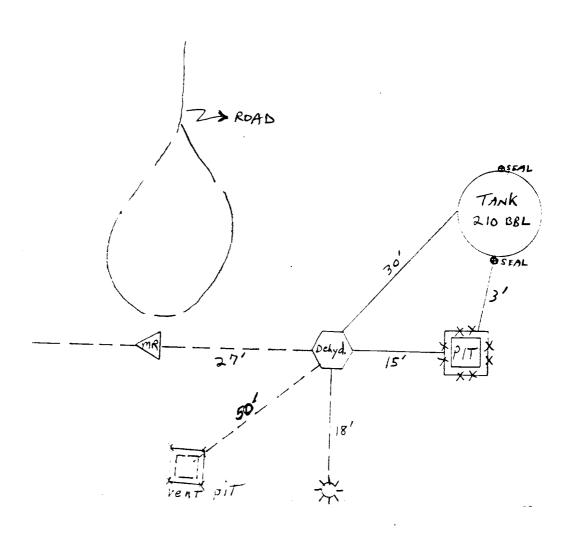
November 1983) Formerly 9-331)		MENT OF TH		SUBMIT IN TRIPLIC. (Other instructions of verse side)		Expires August 31,	1985
	BURE/	AU OF LAND MA	NAGEMENT		al l	SF 073834	
SUN	DRY NOT	ICES AND RE	PORTS ON	J WELLS		INDIAN, ALLOTTEE OR	TRIBS NAM
(Do not use this	form for propo Use "APPLIC	Asis to drill or to de ATION FOR PERMIT	epen or plug back —" for such prope	t to a different reservoir.			
OIL GAS WELL	(a)					EXAK THEMSESOA T	
NAME OF OPERATOR	OTESE.			·		nyon Largo	Unit
		,			1	M OR LEASE NAME	
El Paso Nat	urai Ga	s company				nyon Largo	Unit
P 0 Box 4	1280 Ea	rmington	Nov Morie	. 27400 4220	9. WM		
LOCATION OF WELL (R	eport location of	clearly and in accorde	New Mexic	te requirements.	28	-	
See also space 17 belo At surface	, 4.,			or reducement's		BLD AND POOL, OR WI	LDCAT
	. 1	.750 ' S, 162	5 ' W		1	sin Dakota	
					***	C., T., R., M., OR MLK. SURVEY OR AREA	ARD
						c 13, T25N	
. PERMIT NO.		15. BLEVATIONS (Sh	ow whether DF, RT,	CR, etc.)	12 00	NMPM OFFE OR PARISE 18	
				•	1	o Arriba	NM
	<u> </u>						IN IN
	Check Ap	opropriate Box To	Indicate Nati	re of Notice, Report,	or Other D	ata	
ж	OTICE OF INTEN	TIQN TO:	1	80	BEDQUENT REP	ORT OF:	
TEST WATER SHUT-OF	·•	PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELL	
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CARING	,
SHOOT OR ACIDIZE		ABANDON®		SHOOTING OR ACIDISING		ABANDONMBHT*	'
REPAIR WELL		CHANGE PLANS	1-1	(Other)Vent			$\frac{1}{\sqrt{1}}$
	<u> </u>	CHANGE PLANS					
(Other)			e all pertinent de baurface locations		suits of multi	ple completion on Wort and Log form.) g estimated date of for all markers and	starting a
(Other) DESCRIBE PROPOSED OR proposed work. If nent to this work.)	COMPLETED OPE well is direction	RATIONE (Clearly statemally drilled, give su		(NOTE: Report re	sults of multicompletion Replaces, including errical depths	e estimated date of for all markers and ion pad.	starting az zones peri
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DESCRIBE PROPOSED OR proposed work. If nent to this work.)* It is intend I hereby certify that the sidence of	completed operwell is direction ded to d	true and correct	ce a 8 x	(Norm: Report re Completion or Rectalls, and give pertinent di and measured and true vi	sults of multiposapletion Revaletion Revalet	ion pad.	starting an sones pert

*See Instructions on Reverse Side

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Proposed ---

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Chryon-Large-Unit # 288.
NE/SW SEC. 13-T25N-R6W NMAR
SF-078884

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