Form	9-331
(Mov	1963)

## UNITED STATES SUBMIT IN TRIPLICATE Other instructions on reverse side) **UNITED STATES**

Form approved. Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Lse. Contract #9 6. IF INDIAN, ALLOTTEE OR TRIBE NAME

GEOLOGICAL SURVEY					
SUNDRY	NOTICES	AND	REPORTS	ON	WELLS

(Do not use this form for proposals to drill on to deepen on plant healt to

Jiannille Anach

	NOTICE OF INTER	SUBSEQUENT REPORT OF:			
16.	Check A	opropriate Box To Indicate Nature of Notice, R	leport, or Other Data		
		Cr. 6910'	Rio Arriba	N. Mexico	
14.	. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE	
		and 1070 PWD	Sec. 26, T		
	Amended to 960' FSL	and 16001 Fut	Chacra		
4.	LOCATION OF WELL (Report location of See also space 17 below.) At surface			10. FIELD AND FOOL, OR WILDCAT PLETURED CLIFFS &	
	P.O. Box 2040, Tulsa,		8		
3.	ADDRESS OF OPERATOR		9. WELL NO.		
	Amerada Hess Corporat:	ion, Att: Drlg. Services	J. Apache	ΑĦ	
2.	NAME OF OPERATOR		8. FARM OR LEASE NAM	1E	
1.	OIL GAS X OTHER		7. UNIT AGREEMENT NA	ME	
_	Use "APPLIC.	ATION FOR PERMIT—" for such proposals.)	ervoir. Olicarilla Al	acne	

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	PULL OR ALTER CASING		WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE		FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ABANDONMENT*	
REPAIR WELL	CHANGE PLANS		(Other)		
(Other) Amend fo	ootage on orig.9-3310	X	(NOTE: Report results of mul Completion or Recompletion R	tiple completion on Well seport and Log form.)	
PROBLED DECIMARE OF CALLET THE COLUMN AND ADDRESS OF CALLET THE CA					

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.) \*

Amended location footage and ground elevation





18. I hereby certify that the foregoing is true and correct SIGNED C. Fuffin	Supervisor, Drlg. Adm. Serv.	May 18, 1976
(This space for Federal or State office use)		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE DAT	NE