F	orm	9-331	
(May	1968)

UNITED STATES SUBMIT IN TRIPLICATE® DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

Form approved.

	Buaget	Bure	RU N	5. 42-K	1424
5. LEASE	DESIGN	ATION	AND	SERIAL	NO.
COM	170	11/	-4	- 1/1	1 6

CUNDI	RY NOTICES AND REPORTS	ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(D) mak man Abla dan	T. 11 15.1		
U sint san 100 (C)	se "APPLICATION FOR PERMIT—" for such p	roposals.)	VICAYIlla APach
1.			7. UNIT AGREEMENT NAME
OIL GAS WELL	OTHER		
2. NAME OF OPERATOR		_	8. FARM OR LEASE NAME
CONTINE	nto/ Oil Comp	oan 4	110ay//a 28
3. ADDRESS OF OPERATOR	11		9. WELL NO.
BOX 460.	HOBBS, N.M. 887	140	/5
4. LOCATION OF WELL (Repo See also space 17 below.	ort location clearly and in accordance with any	State requirements.	10. FIELD AND POOL, OR WILDCAT
A +		_	W. LINdvith Gollup 1
2310 FSL	5' 1580' FWL OF S	oc. 34	11. SEC., T., R., M., OR BLK. AND A SURVEY OR AREA
		•	San 24 T 2501 R 114
			Je. 34, 1-23 N, 11-44
14. PERMIT NO.	15. ELEVATIONS (Show whether D	F, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	7010 61		KIOMIKIBA N.M.
16.	Check Appropriate Box To Indicate 1	Natura of Natica Papart or C	Other Data
10.	Check Appropriate box to indicate i		
NOT	TICE OF INTENTION TO:	SUBSEQ	UENT REPORT OF:
TEST WATER SHUT-OFF	PUBLISH 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)	and multiple completion on Wall
(Other Hanse	Soffing Cont of Surfice	Completion or Recomp	s of multiple completion on Well eletion Report and Log form.)
17. DESCRIBE PROPOSED OR CO	OMPLETED OPERATIONS (Clearly state all pertine rell is directionally drilled, give subsurface local	nt details, and give pertinent dates	, including estimated date of starting any all depths for all markers and zones perti-
proposed work. If w nent to this work.) *	reli is directionally drined, give substitute loca		6 224 6)
The Apple	cation For Permi	+ TO UTITIE	oim 7-33/C)
THE AFFI	et Well Dated 3-	8.77 Reparted	The Surface
The 54674	et woll, who so		
-	a Ka 30 F M / M		" ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
(25/Ng /			-1 S-11.
	-1 - 1 Cara an	1 111.74 GOO	SX. CMT,
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	X.	THE COM. COM.	ALL OF
		CIL CON. COM. DIST. 3	
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18. I hereby certify that the	he foregoing is true and correct	1	1112-
SIGNED / HALL	& Touttent of TITLE	Jones Super	DATE 4 -/8-/7
SIGNED LA M.			
(This space for Federa	l or State office use)		
	,		TO A COURT

APPROVED BY _______ CONDITIONS OF APPROVAL, IF ANY:

Wal *See Instructions on Reverse Side

USGS-Durango (6), EI Poso, MJL, BEA, F, 16 (2)