Form 9-331 (May 1963)	DEPART	UNITED STATES MENT OF THE IN SEOLOGICAL SURV	ITERIOR	SUBMIT IN TRIPLICATE (Other instructions on reverse side)	
(Do not us	SUNDRY NOT	ICES AND REPO	RTS ON	a different reservoir.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache
	TATOR	O:1 Can	rpany		8. FARM OR LEASE NAME AXI Apache "O"
3. ADDRESS OF OPERATOR Box 4160 Hobbs N. Mexico 88240 4. Location of Well (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface /// FSL + 860' FWL of Sec 4					10. FIELD AND POOL, OR WILDCAT AX A A POCK & C
					11. SEC., T., R., M., OR BLK. AND SURVEY OR ARBA Sec 47-25NR-4W 12. COUNTY-DR PARISH 13. STATE
14. PERMIT NO.			765		Rio Arriba NM
16.	Check A		licate Natur 	e of Notice, Report, or	Other Data
TEST WATER FRACTURE TRI SHOOT OR ACI REPAIR WELL (Other)	EAT	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS	Description de	Completion or Recon	REPAIRING WELL ALTERING CASING ABANDONMENT* Its of multiple completion on Well apletion Report and Log form.) es, including estimated date of starting any iteal depths for all markers and zones perti-
17. DESCRIBE PROP proposed w nent to this	POSED OR COMPLETED OF ork. If well is direct (work.) *	cionally drilled, give subsu	face locations	and measured and true vert	led 121/4" hole
7 to 4	gudaeo 1961 Ro	n 12 joir	its o	F 85/8", 24	led 121/4" hole # 155, 57+C csg. ss'B', w/490gel, 1505x class
Set o	At 492	! Ceme	ele,.	7590 CFR-2	1505x class
					~ Plug ~ 634" hole.
aou) po			•	
18. I hereby cert	tify that the foregoing	is true and correct	tle A	MIN. SUPV	DATE 7-6-77
(This space	for Federal or State				DATE
APPROVED CONDITION	BY		TLE		DATE

*See Instructions on Reverse Side