UNITED STATES DEPARTMENT OF THE INTERIOR

UNITED STATES DEPARTMENT OF THE INTERIOR	5. LEASE LOTTY SCT NO. 147
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME
1. oil gas well other	8. FARM OR LEASE NAME AXI APache 9. WELL NO.
2. NAME OF OPERATOR COTTINENTS/ OIL COMPANY	10. FIELD OR WILDCAT NAME
3. ADDRÉSS OF OPERATOR BOX 460, HOSBS, N.M. 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: //50 F5L + /870 FWL AT TOP PROD. INTERVAL: 5000000000000000000000000000000000000	12, COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH: Sime. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, PERCONT OR OTHER DATA.	14. API NO.
REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	15. ELEVATIONS (SHOW DF, KDB, AND WD)
TEST WATER SHUT-OFF	
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
ABANDON* + 9 7 Surface (59 X	
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.)* Spudded 3-8-78 and drilled 12 to 40 for 250 and CMfd Ran 92", 36 to 4-40 (Sg 5-f AT 250 and CMfd W/165 5x of C/155 B' CMf With 2/6 CACL2. Circ back 70 5x of CMf. WOC 18 Hys and Tosded you hold on PSI, held Ok. Dr/d afreed with 8/4 hole.	
600 P5/, He/6 Wh. Dr/d allted	1014
	1978)
Subsurface Safety Valve: Manu. and Type	St. 3 Set @ Ft.
18. I hereby certify that the foregoing is true and correct SIGNED TITLE ADMINISTRATION SUPPLY SUPPL	OV. DATE 3-13-78
(This space for Federal or State office	Ce use) DATE DE VE
CONDITIONS OF APPROVAL, IF ANY:	MAR 1 6 1978
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LICENSE SIDE OF SURVEY

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