REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*

UNITED STATES DEPARTMENT OF THE IN **GEOLOGICAL SURVE**

UNITED STATES	5. LEASE 6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME		
1. oil gas well other	Trearilla 30		
2. NAME OF OPERATOR (Ontinental Oil Company)	8		
3. ADDRESS OF OPERATOR BOX 460, Hobbs, N.M. 88240.	V. Lindrich Gollup Datota		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 666 FSL + 866 FWL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 12. COUNTY OR PARISH 13. STATE 14. ATT. D. M.		
6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO. 15. ELEVATIONS (SHOW DF, KDB, AND WD)		
EQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: EST WATER SHUT-OFF	(NOTE: Report results of multiple completion or zone change on Form 9–330.)		

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.)*

Drld. 7/8 Hole From 1002 To. 75/0 TD. Ann 51/0.5#

+ 17# h-55 CS9 Set AT 7499' DV Tool Set At 3597'

PMPL 540 SX of Howco Kith with (Mt dellowed With S85 SX of Ches B cat with Additions. Property DV Tool rule)

PMPD 985 SX of Howco Lite Cart with Additions. Strong DV Tool rule

100 SX CART to Surface, Plus lown AT 6:30 AM, 2-25.78'

TOP of CART AT Surface, Plus lown AT 6:30 AM, 2-25.78'

Top of CART AT Surface, Plus lown AT 6:30 AM, 2-25.78'

Subsurface Safety Valve: Manu. and Ty	/pe		Set @ Ft.
18. I hereby certify that the foregoing SIGNED Weed. Sufficient	is true and correct TITLE ADMIN. SUPV.	DATE _	3-1-78
	(This space for Federal or State office use)		
APPROVED BY	TITLE	DATE	
	*See Instructions on Brusses City		The same of the sa

4565-Durango (5-), E/Paso, MJL, BEA, File