Form 9-331		UNITED STATES SUBMIT IN TRIPLICATE			i B	Form approved. Budget Bureau No. 42-R1424/		
(May 1963)	DEPARTMENT OF THE INTERIOR (Other instructions on region of the instructions of the instruction of the inst					AND SERIAL NO.		
(Do not use	LINDRY NO	TICES AND REP	ORTS ON	WELLS to a different reservoir.	6. IF INDIA	AN, ALLOTTE	E OR TRIBE NAME	
1.	Use AFFER	ATION FOR TEXAS	10. 040H p10p10		7. UNIT AG	REEMENT N	AME	
OIL GA								
WELL X WELL OTHER  2. NAME OF OPERATOR						8. FARM OR LEASE NAME		
tini wawaal	Resources Co	ornora <b>tón</b> n						
3. ADDRESS OF OPE	BATOR 910 Nat	'I Foundation W	i. Bldg.,	3555 NW 58th	9. WELL N	o. 4		
Okla. 1ty, Okla. 73112  4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)						10. FIELD AND POOL, OR WILDCAT Basin=Dakota		
At surface 1650' FSL & 990' FWL Sect. 8-25N-10W					11. SEC., T., R., M., OR BLK. AND			
				SURVEY OR AREA				
					Sect. 8	-52N-10	₩	
14. PERMIT NO.		15. ELEVATIONS (Show	w whether DF, RT,	GR, etc.)			13. STATE	
		©% 6456 <sup>™</sup>			San Juan	n.	New Mexico	
16.	Check A	Appropriate Box To	Indicate Natu	re of Notice, Report, or	Other Data	1		
					QUENT REPORT			
		PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING	WELL	
TEST WATER ST		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING (	I	
SHOOT OR ACID		ABANDON*		SHOOTING OR ACIDIZING		ABANDONME	ENT*	
REPAIR WELL		CHANGE PLANS		(Other)				
(Other)	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)					orm.)		
17. DESCRIBE PROPO proposed wor nent to this w	rk. If well is direc	PERATIONS (Clearly state tionally drilled, give sub	all pertinent de surface locations	tails, and give pertinent date and measured and true verti	s, including elcal depths fo	stimated da r all marke	te of starting any rs and zones perti	
2-4-73:				ed 7 3.15 P.M. 2-3				
•		oints of 5.5/8 wn ( 2:45 A		v) casing, sec 4 2	To, succ	cerents	so with TVD	
Sacies Casiai	nu. Piud io	MIT - 7:45 -7 - 1	2 14 TLU/3	r refter" i re				
			2 %					
			5 3					
			്ക		e i tra			
		150	. `` <b>i</b>	ero S	Tall 1			



FEB 3

18. I hereby certify that the foregoing is tone and correct SIGNED	TITLE Agent	DATE 2-4-1975
(This space for Federal or State office use)		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE