Form 9--331 Dec. 1973

UNITED STATES

/	ronn Approved.			
	Budget	Bureau	No.	42-R1424

5.	LEASE	

MM	22593	

DEPARTMENT OF THE INTERIOR	6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME		
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 reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME		
1. oil gas well x other	Pinto		
well well wother 2. NAME OF OPLRATOR	9. WELL NO.		
Lobo Production	10. FIELD OR WILDCAT NAME		
3. ADDRESS OF OPERATOR	wildcat Picture Cliff		
PO Box 2364 rarmington, NM 87499	11. SEC., T., R., M., OR BLK. AND SURVEY OR		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 800 FNL 800 FEL	AREA Sec 31, t25N, R11W		
AT SURFACE:	12. COUNTY OR PARISH 13. STATE		
AT TOP PROD. INTERVAL:	San Juan NM		
AT TOTAL DEPTH: same	14. API NO.		
1G. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,			
REPORT, OR OTHER DATA	15. ELEVATION DW DF, KDB, AND WD)		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	64 R.		
TEST WATER SHUT-OFF			
FRACTURE TREAT			
SHOOT OR ACIDIZE			
REPAIR WELL	(NOTE: Recort results of multiple completion or zone		
PULL OR ALTER CASING [] RECE	charge on Form 9-330.)		
MULTIPLE COMPLETE CHANGE ZONES TO THE LOND TO THE LO	400E		
ABANDON* T JAN US	1302		
(other) Change Tubing and hole size			

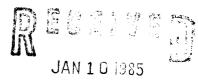
(other) Change Tubing and note Size

BUREAU OF LAND MANAGEMENT

EXTENSINGTO: DECOLUDE AREA

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.)*

1**-7-9**5 change hole size to 6 1/8" and casing size to 4 1/2"



Subsurface Safety Valve: Manu. and Type			OIL CON. DIV. DIST. 3 Set @ Ft.
	hat the foregoing is true and correct		•
SIGNED	Operator	1-7-85 DATE	1-7-85
	(This space for Federal or	State office use)	APPROVED
APPROVED BYCONDITIONS OF APPR	OVAL, IF ANY:	. DATE	
	ų.		JAN 0 9 1885
	*See Instructions on	Reverse Side	ZSZ J. Stan McKee ASST. AREA MANAGER
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