Form 9-3 (May 19	31 63)	UNITED DEPARTMENT C	O STATES	SUBMIT IN TRIPLIC	n re- Buoget pareau No. 42-Ri
			OF THE INTER ICAL SURVEY	IOR verse side)	5. LEASE DESIGNATION AND SERIAL SF - 078897
-	CLIN			0)1)1/2110	6. IF INDIAN, ALLOTTEE OR TRIBE N.
(	Do not use this fo	ORY NOTICES A	ND REPORIS	ON WELLS	
1.		Use "APPLICATION FOR	PERMIT—" for such	back to a different reservoir. proposals.)	
OIL WELL	GAS WELL	٦			7. UNIT AGREEMENT NAME
	OF OPERATOR	OTHER			8. FARM OR LEASE NAME
ja r	. 2480 220	DUCTS COMPAN	v		
3. ADDRI	ESS OF OPERATOR		<u>*                                      </u>		Western 9. WELL NO.
Р.	C. Box 156	O. Parmington. I	New Mexico 8	7401	3
ecc a	rion of WELL (Rej Iso spa <b>ce 17 b</b> elow irface	10. FIELD AND POOL, OR WILDCAT			
AL SC	IIIace				Gallegos Gallup
					11. SEC., T., R., M., OF ELE. AND SURVEY OR AREA
65	0'/N, 660'/	W. Section 7, T	ownship 26 No:	rth, Range II West	Sec. 7-26N-11W NMI
14. PERM	IT NO.	15. ELEVA	TIONS (Show whether D	F, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
		60	48' GL		San Juan New Me
16.		Check Appropriate	Box To Indicate 1	Nature of Notice, Report,	
	NO	TICE OF INTENTION TO:	zon io maicaic i		
<b></b>				80	BSEQUENT REPORT OF:
	TWATER SHUT-OFF		- II	WATER SHUT-OFF	REPAIRING WELL
	OT OR ACIDIZE	MULTIPLE CO	UMPLETE	FRACTURE TREATMENT SHOOTING OR ACIDIZING	ALTERING CASING
REPA	AR WELL	CHANGE PLA	NS -	(Other)	ABANDONMENT*
(Otl	ner)	-		(Nore: Report re	esults of multiple completion on Well completion Report and Log form.)
Sto 1.		ns 7-15-68, Fin			
2.					
3.		perforations 526 se loose at free p		cmt.	
٠. ٤.					이 환경 안상 그 그런 취용
5.	5000 70 s	ar ome 400 and 14	er Pictured Cliffs.		
6.	Spot 35 sx cmt, $4\%$ gel, 420-315' - Base Ojo Alamo. Place 10 sx cmt top surface casing with welded marker in place				
7.	Clean loc	carion carion	ce casing with	weided marker in p	lace
, .	<b></b>	,~ bl∀ii o			FAFA
		•	•		
		. '			
		•	•	A Maria Sandara	SFD n-
				CEN O	SEP 3 0 1968
				SEP 2 7 196	8 QIL CON
					DIST COM.
				U. S. G. TLASI AL SI	OIL CON. COM. DIST. 3
18. I here	by certify that th	e foregoing is true and c	orrect		<del></del>
	eo <u>hy: "in l</u>			gent	2. 20000615 10
		•	TABLE A	Scar.	DATE August 15, 19
(This	space for Federal	or State office use)			y salah ing
	OVED BY		TITLE	······································	DATE
CANAD	ITIONS OF APPR	ZOVAT, TO ANDL.			