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Form 9-331 (May 1963)	UNITED STATES DEPARTMENT OF THE INTERIO	SUBMIT IN TRIPLICATE (Other instructions on reverse side)	Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.
	GEOLOGICAL SURVEY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use	UNDRY NOTICES AND REPORTS O this form for proposals to drill or to deepen or plug bar Use "APPLICATION FOR PERMIT" for such pro	N WELLS ck to a different reservoir. posals.)	2.7
1.			7. UNIT AGREEMENT NAME
OIL GAS WELL WE	LL OTHER		8. FARM OR LEASE NAME
RENSO	1 - 101	•	RIADLE
3. ADDRESS OF OPER	BATOR 1 (1 / 7) /	any for N/M	9. WELL NO.
4. LOCATION OF WEI	Etvoleum CNTEV 5/09 TA LL (Report location clearly and in accordance) with any S	tate requirements.*	10. FIELD AND POOL, OR WILDCAT
At surface	(= T)	IN RISW A"	11. SEC., T., B., M., OR BLK. AND
1022 F			SURVEY OR AREA SNR 13W
SAN	JUAN CO. N.M.		Nm Piri
14. PERMIT NO.	15. ELEVATIONS (Show whether DF,		SANJUAN N.M.
16.	Check Appropriate Box To Indicate No	ature of Notice, Report, or	Other Data
	NOTICE OF INTENTION TO:	SUBSE	QUENT REPORT OF:
TEST WATER SE	HUT-OFF PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREA		FRACTURE TREATMENT SHOOTING OR ACIDIZING	ALTERING CASING ABANDONMENT*
SHOOT OR ACID:	ABANDON* CHANGE PLANS	(Other)	
(Other)		Completion or Recon	its of multiple completion on Well apletion Report and Log form.)
	sed or completed operations (Clearly state all pertinent k. If well is directionally drilled, give subsurface locationsk.).		
1 2	is well that	•	· 集一部的新一型海绵和 第二十
,	4		
5/31/	66 Move in Equipment		
	6 Spot 308x Alug 1700	101791	
6/1/6	6 Spot 3087 Aug 120	,	그는 경험을 되었다. 육리관광 학회
, , , , ,			
	RECOVERED J. CASHY & 33	358x plug 400	0 70 300
	Erect PAA MARKER UY	Just Surface	Plug
		ELFINEN	
	/8	[PFIARD / 1	RECEIVED
	1 •••	22 - 1066	
	\ . <i>P</i>	UG151966	AUG 1 2 1966
	\ 0	L CON. COM.	75 - 7 - 5 - 6 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7
		DIST. 3	U. S. GEOLOGICAL SURVEY
			FARMINGTON, N. M.
18. I hereby certif	y that the foregoing is true and correct	Part for Com	tor DATE 6/10/66
SIGNED	January Selfer TITLE A	yer yer	DATE TO THE
(This space for	or Federal or State office use)		
APPROVED E	OF APPROVAL IF ANY:		DATE