	M. M. C. C. COF					Copy to SJ.			
Form 9-331 (May 1963)	m 3-331 GIDVIN TX = 3TD TO ANY				Form approved.				
DEPA					5. LEASE DESIGNATION AND SERIAL NO.				
GEOLOGICAL SURVEY						2939B-A			
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 "APPLICATION FOR PERMIT—" for such proposals.) 1. OIL [X] GAS [7]					6. IF INDI	AN, ALLOTTEE	OR TRIBE NAME		
					7. UNIT A	GREEMENT NAM	E		
OIL GAS TA WELL OTHER TA 2. NAME OF OPERATOR						· ·	`		
Atlantic Richfield Company					1 - 2	er "A"	·* •		
3. ADDRESS OF OPERATOR					9. WELL				
P. O. Box 1978, Roswell, New Mexico 88201					30				
 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 					13 - 2 5	AND POOL, OR	•		
1880' FSL, 660' FEL (Unit Letter I)					· 11. SEC.,	-Seven r., r., m., or bl			
						VET OR AREA			
							7S, R31E		
14. PERMIT NO.	15. ELEVATIONS (Sh		•		12	Y OR PARISH			
10	688' DF		_	Edd		N.M.			
	k Appropriate Box To	Indicate N	ature of Notice	, Report, or	Other Data		-		
NOTICE OF	INTENTION TO:			SUBSE	QUENT REPORT	OF:			
TEST WATER SHUT-OFF	PULL OR ALTER CASIN	G	WATER SHU	[·		REPAIRING WE			
FRACTURE TREAT SHOOT OR ACIDIZE	MULTIPLE COMPLETE ABANDON*		FRACTURE T SHOOTING O		_	ALTERING CAS	·		
REPAIR WELL	CHANGE PLANS		(Other)	Tempora	 _	pandon	X		
(Other)			Compl	: Report result etion or Recom	pletion Report	t and Log form	1.)		
17. DESCRIBE PROPOSED OR COMPLETE proposed work. If well is d nent to this work.)*	D OPERATIONS (Clearly staticectionally drilled, give su	te all pertinent absurface locati	details, and give	pertinent date and true verti	s, including e cal depths for	stimated date r all markers :	of starting any and zones perti-		
nent to this work.)				· <u>ā</u>		2 2 N	<u>.</u>		
	•			3			en e		
	l was shut in		-	-	o hold	the	· •		
well for	possible sec	ondary	recovery	use.		- t = 54 / 1 - 4 / 1 / 1 / 1	The state of the s		
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18. I hereby certify that the forego	ing is true and correct		· · · · · · · · · · · · · · · · · · ·				<u>:</u>		
Ol Last	ing is true and correct	Dis	t. Drlg.	Supervi	sor	8/20	/71		
SIGNED W. X. YULC	res	TITLE			DAT	TE			
(This space for Federal or Stat	e office use)				# A A S I	3-1-1	-		
APPROVED BY	TO ANY.	TITLE		·	DAT	E	-		
SOR MILES	IF ANY:						.		
DP (1) 1971 /	-				eghi eviton ui tare Ehifi tare Ehifi edipecodo	Southers of others not the of	•		
aUG 2 South	*See	Instructions	on Reverse Sid	e	3 声 平 4	ळ इ.क.इ			
BEEKMAINEER	l .								