Form 9-331				C2 (1)
(May 1963)	NITED STA DEPARTMENT OF TH	TES SUBMIT IN COther Instrue		Form aptroved. Budget Burcau No. 42-R1
	GEOLOGICAL S		l N	M 0397673
(Do not use	UNDRY NOTICES AND RI this form for proposals to drill or to de Use "APPLICATION FOR PERMIT	EPORTS ON WELLS  epen or plug back to a different rese	i i	INDIAN, ALLOTTEE OR TRIBE NA
		' for such proposals.)		NIT AGREEMENT NAME
OIL GAS WELL WE	LL OTHER			ACCOUNTENT WIND
TENNE ADDRESS OF OPER	ECO OIL COMPANY		Fo	LK FEDERAL
130x 1	D3) MINLAND TE	KAS 79701	9. W	ELL NO.
See also space 17 At surface	(Report location clearly and in accordance below.)	ince with any State requirements.*	10. F	TELD AND POOL, OR WILDCAT
				LAYBURG JACICSO EC., T., R., M., OR BLK. AND SURVEY OR AREA
1980 FNL	\$660 FEL SEC 17	T-17-5' D705' ().	11 ملله جو	L IMC DAT
PERMIT NO.	15. ELEVATIONS (Sh	ow whether DF, RT, GR, etc.)	12. 0	OUNTY OR PARISH 13. STATE
:	· -	5.1 GR	<u>    Fi</u>	DDY ININ
	NOTICE OF INTENTION TO:	Indicate Nature of Notice, R	sport, or Other I subsequent re	· · · · · · · · · · · · · · · · · · ·
TEST WATER SHU	T-OFF PULL OR ALTER CASING	WATER SHUT-OF	<u> </u>	REPAIRING WELL
FRACTURE TREAT SHOOT OR ACIDIZE	MULTIPLE COMPLETE ABANDON*	FRACTURE TREAT	<del></del>	ALTERING CASING
REPAIR WELL, (Other)	CHANGE PLANS	(Other) C	15,NG	ABANDONMENT*
DESCRIBE PRODUCER	OR COMPLETED OPERATIONS (Clearly stat If well is directionally drilled, give su	Completion	or Recompletion R	tiple completion on Well eport and Log form.)
nent to this worl	If well is directionally drilled, give suck.) *	bsurface locations and measured and	true vertical depth	s for all markers and zones pe
_	1	4.1		
DRIG .	77/8" HOLE -RAN	80 JTS 4/2 10.	5# CASIN	6 SET AT
2.600	- CEMENTED WITH	175sx CLASS	C.PD	12:05 PM
1 10 1	9. Top cement	1970' WAC 241	Jes . Tes	TCASING
		•		ing a second of the second of
7200g	for 30 MINUTES	. Hern OK		
1	NG ON COMPLETION			
00/400				ration (1886) is a second of the second of t
			RECE	WEL
		RESELVED	JAN2	1969
		JAN 27 1969	JYNS.	MENT GEXICO STORY CITEMEN
		_	U. S. GELLES	A SAIGU
	1	O. O. O. Artesia, office	Wire,	
hereby certify the	at the foregoing is true and correct	Sa Da - Ala		
SIGNED		ITLE SURONCIEN	<u></u>	ATE 1-20-69
This space for Fe	deral or state office use)			
CONDITIONS OF	TPPROVAL, IF ANY:	ITLE	<b>D</b>	ATE
2 . AN 2	hill		-	

\*See Instructions on Reverse Side