LINITED STATES

OMILED SIVIES	5. LEASE
DEPARTMENT OF THE INTERIOR	S.F. 081111 K
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
GEOLOGICAL JURVEI	
	7 LINUT ACCEPACIT NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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.)	
reservoir, Use Form 3-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil — gas —	S. SAN Luis
well well other	9. WELL NO.
2. NAME OF OPERATOR NOEL REYNOLDS	ANNZ
Box 356	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR Flora Vista, NM 87415	
J. ADDRESS OF STERATOR	11. SEC., T., R., M., OR BLK. AND SURVEY OR
A LOCATION OF WELL (DEPORT LOCATION OF FARLY CO. ACCOUNTY	AREA
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	33 18N 3W
below.) AT SURFACE: 354' F.N.L. AND 420' F.E.L	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	
AT TOTAL DEPTH: ['	SANDOVAL N.M.
336	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	6,387'a.L.
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	ED S
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
pull or alter casing \square \square MAR $3.1.19$	986 change on Form 9–330.)
MULTIPLE COMPLETE	
CHANGE ZONES BUREAU OF LAND MA	NAGEMENT
ABANDON* Z FARMINGTON RESOL	
(other)	
17 DECORIDE PROPOSED OR COMPLETED OPERATIONS (Clearly state	e all pertinent details, and dive pertinent dates
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is d	irectionally drilled, give subsurface locations and
measured and true vertical depths for all markers and zones pertiner	nt to this work.)*
Plat Pda Rudillia	Carin Iron TO W serbar
· run in I a my freeing	wany of some
Plan to P& a By filling & With Cement, Exect dry hale mark	
With coment Exect dry hale mail	Cer religible location
with them, the	
4	
anticipate Plagging by any 1, 1	986 RECEIVEM
There is a second of a second of	
· ·	
	APR 0 4 1986
	Olloca
	OIL CON. DIV.
	DIST. 3
	- Joj. 3
Subsurface Safety Valve: Manu. and Type	Set @
	Programme Company of the Company of
18. I hereby certify that the foregoing is true and correct	
SIGNED Marsh TITLE aperation	DATE 3-31-86
SIGNED THE COUNTY OF THE COUNT	Unit de la constant d
(This space for Federal or State off	fice use)
	AP-20 1 1922
APPROVED BY TITLE TITLE	DATE
COMPITIONS OF AFFROYAL, IF ANT.	1 mo Kelle

*See Instructions on Reverse Side