Form 9-331 (May 1963)

UNITED STATES

SUBMIT IN TRIPLICATE. (Other instructions on re-

Form approved. Budget Bureau No. 42-R1424.

DEP	5. LEASE DESIGNATION AND SERIAL NO.			
SUNDRY (Do not use this form for Use "A	6. IFCINDIAN, ALLOTTEE OR TRIBE NAME			
1. OIL GAS WELL OT	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME			
2. NAME OF OPERATOR				
3. ADDRESS OF OPERATOR			9, WELL NO.	
501 Airport Drive	10. PIELD AND POOL, OR WILDCAT			
4. LOCATION OF WELL (Report loc See also space 17 below.) At surface				
330' 78L 4 2319'	FEL, Section 18, 2-29-	H, 8-16-W	11. SEC, T., E., M., OR	betten 18,
14. PERMIT NO.	15. ELEVATIONS (Show whether	DF, RT, GR, etc.)	12. COUNTY OR PARIS	IS. STATE
	ck Appropriate Box To Indicate	• • •	Other Data	
NOTICE O	NOTICE OF INTENTION TO:			
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING	WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING (
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMI	INT*
REPAIR WELL (Other)	CHANGE PLANS	(Other) (Note: Report result Completion or Recom	ts of multiple completion pletion Report and Log fo	on Well
17. DESCRIBE PROPOSED OR COMPLE proposed work. If well is nent to this work.) *	TED OPERATIONS (Clearly state all pertin directionally drilled, give subsurface lo	nent details, and give pertinent date exations and measured and true verti	s, including estimated da cal depths for all marke	te of starting any
nent to this work,				
				1 4 - •
the subject well Lynes packer was	was elecand out and driest at 625'. The well		a 25 ol 406'. 1020 ani 145 88	**.

MAR 1 5 1968
U. S. GEOLOGICAL SURVE

18. I hereby certify that the foregoing is true and correct							
SIGNED	Angelia de la companio della compani	TITLE _	Arm Engineer	*	DATE:	March 14,	1940
	G. V. Arton, Jr.					3 7 2 3	
(This space for Federal or State office use)		. ,:	-				
APPROVED BY		TITLE			DATE _		
CONDITION	S OF APPROVAL, IF ANY:			•			