Form 9-331 (May 1963)	UNITED STATES PEPARTMENT OF THE INTE	SUBMIT IN TRIPLICATE* (Other instructions on reverse side)	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SEELAL NO.
GEOLOGICAL SURVEY			14-20-605-515
SUNDR (Do not use this form Use	6. IF INDIAN, ALEOTTES OR TRIBE NAME		
1.	R AFFINATION TON TENME		7. UNIT AGRESMENT NAME
OIL GAS WELL	OTHER		
2. NAME OF OPERATOR			8. FARM OR LEASE NAME
James P. We	osley		Neva Jo AA
3. ADDRESS OF OPERATOR	Carta Calamata State		9. WELL NOT & TO STATE OF THE S
Box 1227 Certes, Celerede 51321 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			10. FIELD AND POOL, OF WINDCAT
See also space 17 below.) At surface 810 FRL and 2310 FEL			Henry Rocks Gulling
			11. SEC., T., E., M., OR BLE. AND SURVEY OF AREA
_			Sec. 19, 732N, R12N, MAPH
	15. ELEVATIONS (Show whether	DR DR CR etc.)	12. COUNTY OF PARISH 13. STATE
14. PERMIT NO.		Dr. RI, dr., ew.)	E 2 1 2
MR. MeGrath 12-1	19-71 5492 GL		Jan Jan Hert Section
16.	Check Appropriate Box To Indicate		= = 4 € € € € € € €
NOT	ICE OF INTENTION TO:	SUBSEQU	ENT REPORT
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	AREARING WILL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CARING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMIGHT*
REPAIR WELL	CHANGE PLANS	(Other)(Note: Report results	of multiple completion on Well
(Other)	MPLETED OPERATIONS (Clearly state all perti	next details and give pertinent dates	etion Report and Log form.)
proposed work. If we nent to this work.) *	MPLETED OPERATIONS (Clearly state an perti-	ocations and measured and true vertice	if depiles for all interest and about ports
	coment from TD (1362') be		esting Mill be left
	ted from 35' to surface.	Freet the proper plug a	nd abandon mairker
and clean location	lo		
			그는 이 학교회원의 사학 경기회회
	WIFE.		
	COUNTY /		그는 물취를 되면 그는 일수 화를 하는
	1914		
	50 COW.	A marine to the same of the	
	on. 3	OOT 1 0 10	
	OIL COM. COM.	OCT 1 9 19	
	Our Dis		8 1
		U. S. CECH COICAL	Marked of the particular of the state of the
			그는 그 화장 입통하는 화장 그 환화학 때문
,			A SA TALLES
18. I hereby certify that th	e foregoing is true and correct		
SIGNED JAMES	+ Marchey TITLE_	Operator	DATE 10/18/72
(This space for Federal	or State office use),	T	
APPROVED BY	TITLE		PATE SE SE SES
CONDITIONS OF APP			10 10 10 10 10 10 10 10 10 10 10 10 10 1