Form 3160-5 (November 1983) (Formerly 9-331)	DEPARTMENT .	STATES OF THE INTERIO AND MANAGEMENT	NM OIL CONS. COMMIS LOSME LACTRICLOS OF A AFTER 12, NM 88210	Expires August 31, 1985
	BUREAU OF L	AND MANAGEMENT	. PEGELVED BY	G. IF INDIAN, ALLOTTER OR TRIBE HAME
SUN	DRY NOTICES A	ND REPORTS O	N WELLS	
(Do not use this form for proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT-" for such			possile D 28 1984	
i.	 		OFL HO 199	7. UNIT AGEREMENT NAME
WELL GAR WELL	X OTRER		O. C. D.	S. FARM OR LEASE HAME
2. NAME OF OPERATOR			ARTESIA, OFFICE	Mike Federal Com.
Stevens C	perating Cor	poration 🗡 💆		9. WELL NO.
3. ADDRESS OF OPERATOR		Doggaall Moral	Movico 88201	1
P. U. BOX	eport location clearly and	In accordance with any 8	Mexico 88201 tate requirements.	10. FIELD AND POOL, OR WILDCAT
See also space 17 belo At surface	660' FSL,	L650' FWL		Pecos Slope Abo
13. T		252 31		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
1.1 M	(P)			10 70 7 7 7
		VATIONS (Show whether Dr.	et or etc.)	Sec. 12, T-8-S, R-25-E
14. PERMIT NO.	15. ECZ	3549 GR 35		Chaves NM
16.	Check Appropria	te Box To Indicate No	ature of Notice, Report, or C	Other Data
NOTICE OF INTENTION TO:				UNIT REPORT OF:
TEST WATER BRUT-O	FF FCLL OR	LITER CABING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT		COMPLETE	FRACTURE TREATMENT	ALTERING CASING
BROOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE P	LANS X	(Other)	of multiple completion on Well
(Other)			Completion or Recomp	oletion Report and Log form.) including estimated date of starting any lidepths for all markers and sones perti-
we propos		ROGRAM	ogram as follows:	
SIZE OF HOLE	BIZE OF CABING	WEIGHT PER FOOT	SETTING DEPTH	
14 3/4"	10 3/4"	40.5#	950'	
9 1/2"	7 5/8"	26.4#	1600'	
6 1/2 or 7 7/	8" 4 1/2"	10.5#	4500'	
	NEW P	ROGRAM		
			SETTING DEPTH	
BIZE OF HOLE	O E / O II	WEIGHT PER FOOT		
$\frac{12}{7}\frac{1/4"}{7/9"}$				
1 170	4 1/2			
12 1/4" 7 7/8"	8 5/8" 4 1/2"	20# 9.5#	800' 4500'	
SIGNED	t the foregoing is true as	TITLE P	roduction Control	ler 9-19-84
(This space for Per	eral or State once use L			
	APPROVED	TITLE		DATE
CONDITIONS OF A (Orig.	APPROVAL, IF ANY: Sgd.) PETER W. CI	HESTER		
	SEP 2 0 198	1		

*See Instructions on Reverse Side