		N.			l l			
Form 9-331 (May 1963)		UNITED STATE	ES	SUBMIT IN TRIPL'	LG-	Form app Budget Budget	ureau No.	
(pear recov)		MEN. OF THE) { verse side)	6.	NM O10		
		GEOLOGICAL SU	RVEY		- _{6.}	INIVI UIC		
SUNI	DRY NOT	TICES AND REP	ORTS C	N WELLS				
(Do not use this i	orm for propo Use "APPLIC	sals to drill or to deep ATION FOR PERMIT-	or plug bar for such pro	ck to a different reservoir.				
1.					7.	UNIT AGREEMENT	aman 1	
WELL X WELL	OTHER					FARM OR LEASE	NAME	
2. NAME OF OPERATOR TO ALL T. MOCHALISM						Sue Federal		
Jack L. McClellan 3. ADDRESS OF OPERATOR					9.	9. WELL NO.		
Box 848, Roswell N.M. 88201						2 2 10. FIELD AND POOL, OR WILDCAT		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)					1	Double L Queen		
At surface						1. SEC., T., B., M.,	OR BLK. AN	
2310' FSL an	a 1650!	FWI.				Sec 6 T-		R-3
2)10 IDD an	0. 1000	I I					19 6	
14. PERMIT NO.		15. ELEVATIONS (Short			1:	2. COUNTY OR PAI		
		3889	9' G.L.			Chares	II	I.M.
16.	Check A	ppropriate Box To	Indicate N	ature of Notice, Report,	, or Oth	er Data		
	OTICE OF INTE	INTION TO:		8	ubsequent	report of:		
TEST WATER SHUT-OF	·r	PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRI	NG WELL	
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT			G CABING	
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZIN	10	ABANDO	NMENT*	
REPAIR WELL		CHANGE PLANS		(Other)(Note: Report	results of	multiple complet on Report and Lo	lon on We	11
(Other)	COMPLETED OF	PERATIONS (Clearly state	all pertinent	t details, and give pertinent ions and measured and true	dates inc	hetemites anibule	date of st	artin
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T.D. 2002 Ran Gamma Ray 1978 with 2 scrude, 25,000	Neutro hots pe # 20/40	er It. Fract	ased ho ured fo # 10-20	ole, Perforatoration with a	ed 19 25,00	68to 74, O gals Ĺ	1976 ease	to
T.D. 2002 Ran Gamma Ray 1978 with 2 s crude, 25,000	Neutro hots pe # 20/40	er It. Fract	ased ho ured fo # 10-20	ole, Perforatoration with a	ed 19 25,00	68to 74, 0 gals L	casc	to
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Date