Form 9-331

NITED STATES

Form approved.

(May 1963)	DEPART	MENT OF THE	INTERI	OR (Other instructions on verse side)	I C	rion and serial no.
		SEOLOGICAL SU			NM 036718	
9	UNDRY NOT	ICES AND REP	ORTS C	N WELLS	6. IF INDIAN, ALLA	OTTEE OR TRIBE NAME
				nck to a different reservoir. oposals.)		
1.	036 1111 220	7. UNIT AGREEMEN	T NAME			
OIL GA	S COTHER	`:.				
2. NAME OF OPERAT		8. FARM OR LEASE	NAME			
Mountair 3. Address of OPE	n States Petr	Brotar 9. WELL NO.	i i i i i i i i i i i i i i i i i i i			
	Roswell, N	1 1 .				
4. LOCATION OF WE See also space 1 At surface	LL (Report location		10. FIELD AND POOL, OR WILDCAT Wildcat			
990' FSL	_ & FEL Secti	11. SEC., T., R., M. SURVEY OR	OR BLK. AND			
		-			29-15S-28E	
14. PERMIT NO.		15. ELEVATIONS (Show	whathar DF	PT CP atc.)	12. COUNTY OR PA	RISH 13. STATE
14. PERMIT NO.		10. BLEVATIONS (SHOW	whether br	ni, da, eddy	Chaves	N.M
		3610.7_G i				
16.	Check A	opropriate Box to I	ndicate N	ature of Notice, Report, o		
	NOTICE OF INTER	ITION TO:		SUBS	SEQUENT REPORT OF:	··· [
TEST WATER SI	HUT-OFF	PULL OR ALTER CASING		WATER SHUT-OFF	<u> </u>	ING WELL
FRACTURE TREA		MULTIPLE COMPLETE		FRACTURE TREATMENT		NG CASING
SHOOT OR ACID		ABANDON* CHANGE PLANS		(Other) Set Casi		MENT
REPAIR WELL (Other)	لبسا	CHANGE TERMS	1	(Note: Report rest	ults of multiple comple impletion Report and Lo	tion on Well
17	SED OR COMPLETED OP	ERATIONS (Clearly state	all pertinen	t details, and give pertinent da	tes including estimates	date of starting any
nent to this w	ork.) *	onany drined, give sub-	·	ions and measured and true ver	1	
Set 343'	of 12-3/4"	34# surface o	casing.	Cemented with 300	sxs reg neat	
cement +	- 2% CaCl. P	lug down 1:00	PM 4-1	5-71. WOC 18 hours	. Tested at	
600 psi	for 30 min,	pressure held.	•			
	•				<u>9</u> 4. ≥ 1 1 ≥ 4. ± 1.	
			/ 3 m.			# [2] 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	RECEIVED					
					REC	EIVED
				APR 2 0 1971	APR	19 1971
	0 • -				J. S. GEOL	OGICAL SURVEY
			•	O. C. C. Artesia, Office		NEW MEXICO
18. I hereby certify	y that the foregoing	is true and correct				
signed	my 6-1/14	Wenor 1	TITLE	Geologist	DATE 4-	16-71
(This space for	r Federal or State of	ice use)				
APPROVED BY	Y	T	TITLE		DATE	
CONDITIONS	OF APPROVAESIF	ANY:				
FD FOR RECOI	11/					

*See Instructions on Reverse Side