		i.	1979 - Marine Marine Marine Marine Marine Sama	951
Form 9-331 (May 1963)	DEPARTMEN	TED STATES T OF THE IN OGICAL SURVE		TE. Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SEBIAL NO. NM-23491
SUN (Do not use this :	DRY NOTICES	AND REPOR	TS ON WELLS plug back to a different reservoir. such proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS WELL GAS 2. NAME OF OPERATOR	OTHER Dry	/ Hole	RECEIVE	7. UNIT AGREEMENT NAME D Flying H Unit 8. FARM OB LEASE NAME
3. ADDRESS OF OPERATOR	an Oil Corpor	$\frac{\text{Flying H Unit } \tau R 3}{9}$		
A. LOCATION OF WELL (Re See also space 17 below At surface	awer 730, Ros port location clearly w.) L & 660' FEL	Well, NM 882 and in accordance wit	02 h any State requirementO, C. D. ARTESIA, OFFICE	10. FIELD AND POOL, OR WILDCAT
14. PERMIT NO.	15.	ELEVATIONS (Show when 5099' G.		Sec. 14-T15S-R19E 12. COUNTY ON PARISH 13. STATE Chaves NM
6. Check Appropriate Box To Indicate Nature of Notice, Report, or (
				SEQUENT REPORT OF:
TEST WATER SHUT-OFI Fracture treat Shoot or acidize Repair well			WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other)	REPAIRING WELL
(Other)			Completion or Reco	ults of multiple completion on Well mpletion Report and Log form.) tes, including estimated date of starting any
cas 2100 925 and	ing off at 20)'. Set 50 s '. Set 10 sx	sing. Shot o 45' and pulle x plug from 9 plug at surf	casing at 2200' but cou ed to surface. Set a 2 925' to 1061'. WOC - 2	s C plug from 3300'-3440' uld not pull loose, shot 25 sx plug from 1950' to 2 hours and tagged plug at y hole marker and clean ' tubing in hole while
				AFR 2 CLIMA
8. I hereby certify that the		••••		<u>8</u>
SIGNED and	Kagdale		Operations Manager	DATE4/22/85
(This space for Federal	or State office use)			
APPROVED BY CONDITIONS OF APPI	ROVAL, IF ANY:	Liability under bon surface restoration	igging of the well bore. d is retained until h is completed. ions on Reverse Side	DATPPROVED DELER W. CHESTER Deler W: Chester OCT 6 1987
				BUREAU OF LAND MANAGEMENT

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