Form Approved. Budget Bureau No. 42-R1424

UNITED STATES

Artesia, NM DEPARTMENT OF THE INTERIOR CEOLOGICAL SUBVEY

983:1 HEASE MM 02 55 27 - A	
6. IF INDIAN, ALLOTTEE OR TE	
	RECEIVED
7. UNIT AGREEMENT NAME	
	FEB 24 198
8. FARM OR LEASE NAME	1 ED 24 198
BERRY A	
9. WELL NO.	
15	ARTESIA, OFFICE
10. FIELD OR WILDCAT NAME	 ,

GEOLOGICAL SURVEY	RECEIV
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir, Use Form 9-331-C for such proposals.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME FEB 24 1
1. oil gas cother	BERRY A O. C. D.
2. NAME OF OPERATOR LATCH OPERATIONS Leonard Latch 3. ADDRESS OF OPERATOR Box 1010 8 Lubbock tx 79408 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 2310 FAL & FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	10. FIELD OR WILDCAT NAME Red Lake On-Gring SA 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 24 175 27 E 12. COUNTY OR PARISH 13. STATE EDDY 14. API NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) SUBSEQUENT REPORT OF: SUBSEQUENT REPORT OF: FEB 1 CAL & CAL & COL & COSWELL, N	0 1982 change on Form 9–330.) GAS CCAL SURVEY

including estimated date of starting any proposed work. If well is directionally drilled, gi measured and true vertical depths for all markers and zones pertinent to this work.)*

1. Reenter well Z. Clean to 470' 3. Prepare to Abandon 4. Fill hole with cement Tentral Appeared J. Gillhams

Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	4
	ent DATE 12 Feb 82
This space for Fed	deral or State office use)
(Oris. Sod.) FERRY W. CHISTER THE	DATE
CONDITIONS OF APPROVAL, IF ANY:	
FEB 2 2 1982	
FOR	
JAMES A. GILLHAM DISTRICT SUPERVISOR ^{See} Instructi	ons on Reverse Side