Form 9-331 (May 1963)	UI ED STATES	SUBMIT IN TRII AT	E Form approve	u No. 42-R1424.
				END BERIAL NO.
	GEOLOGICAL SUR		LC 057798  6. IF INDIAN, ALLOTTEE	OR TRIBE NAME
SUNI (Do not use this f	ORY NOTICES AND REPC form for proposals to drill or to deepen Use "APPLICATION FOR PERMIT—" for	ORTS ON WELLS or plug back to a different reservoir. or such proposals.)		
1.			7. UNIT AGREEMENT NA	ми
METT METT GYS	OTHER	RECEIVE	D	
2. NAME OF OPERATOR			8. FARM OR LEASE NAM	.5
<u>Cities Servic</u>	ce Oil Company	DFC 2 1974	Magruder A	
3. ADDRESS OF OPERATOR		DLC 213/4		
P. 0. Box 191	19 - Midland, Texas 79	/O   with any State requirements.	15 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.) At surface			Empire ABO	
	- K 1650 Et from the So			LK. AND
Unit Letter - K, 1650 Ft from the South Line and 2310 Ft from the West Line, Section 35, Township 17S, Range 27E NMPM.			NUKYRI OK ABRA	
the west time	,, occe,on 99, rememp	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	55 1	w 1
14. PERMIT NO.	15. ELEVATIONS (Show w	whether DF, RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
			Eddy	New Mexico
16.	Check Appropriate Box To Inc	licate Nature of Notice, Report, o	r Other Data	
N	OTICE OF INTENTION TO:		EQUENT REPORT OF:	
	·	¬	REPAIRING W	T. T. T.
TEST WATER SHUT-OF	<u>  </u>	WATER SHUT-OFF FRACTURE TREATMENT	ALTERING CA	
FRACTURE TREAT SHOOT OR ACIDIZE	MULTIPLE COMPLETE ABANDON*	SHOOTING OR ACIDIZING	ABANDONMEN	<u>  </u>
REPAIR WELL	CHANGE PLANS	(Other)	Well Status	X
(Other)		(Note: Report resu Completion or Reco	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
	COMPLETED OPERATIONS (Clearly state all well is directionally drilled, give subsur	l pertinent details, and give pertinent da face locations and measured and true ver		
TA'd 11-11-6	l - Study for remedi	al work or Plug & Abandon	<b>n.</b>	
			,	• .
		,		
			the state of the s	

		RECEIVED
		NOV 2 0 1974 U. S. GEOLOGICAL SURVEY ARTESIA, NEW MEXICO
18. I hereby certify that the foregoing is true and	Correct  TITLE Region Petroleum E	
APPROVED BY CONDITIONS OF APPROVAL, IF ANY: UNLESS F	FURTHER APPROVED: WELL MUST O BENEFICAL USE OR PLUGGED BY TOBER OF TST 1- 1975	DATE
NOV	*See Instructions on Reverse Side	
ACTING DISTRICT STO MICES		