apry (4 3/ N. . Form approved. Budget Bureau No. 42-R1424. Form 9-331 (May 1963) D STATES SUBMIT IN TRIPL 'E* DEPARTMENT OF THE INTERIOR (Other instructions verse side) 5. LEASE DESIGNATION AND SERIAL NO. LC-045818-B GEOLOGICAL SURVEY 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 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 "APPLICATION FOR PERMIT—" for such proposals.) RECEIVED 7. UNIT AGREEMENT NAME OIL GAS WELL OTHER 8. FARM OR LEASE NAME NAME OF OPERATOR MAY 2 1 1974 William F. Dooley Hastle 9. WELL NO. 3. ADDRESS OF OPERATOR LOCATION OF WELL (Report location clearly and in accordance with any State Expression before 17 below.)

At surface 10. FIELD AND POOL, OR WILDCAT Smpire (Y-SE) 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1.650'from 0 line 1 566 18, 117, 128 12. COUNTY OR PARISH 13. STATE 990' from B line 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 14. PERMIT NO. 3574 addy Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data 16. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL TEST WATER SHUT-OFF ALTERING CASING FRACTURE TREATMENT

TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL
FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING
SHOOT OR ACIDIZE ABANDON*
CHANGE PLANS
(Other)
(Other)
(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

Change in operator. Effective Feb 26, 1974. Intend to return to production.

trevious operator:

inter letrology corporation 207 Ath St. Artesis. S. N. 88219

RECEIVED

MAY 1 6 10 74

M. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

8. I hereby centify that the foregoing is true and correct		1,	
SIGNED / m, J Doolles	TITLE	operator	DATE 5/14/74
(This space for Federal or State office use)	TITLE	DISTRICT ENGINEER	_{DATE} MAY 1 7 1974
CONDITIONS OF APPROVAL, IF ANY:			