## M. M. O. C. C. COPY

SUBMIT IN PLICATE\*

Form approved. Budget Bureau No. 42-R1424.

	-प			5. LEASE DESIGNATION AND SERIAL NO.
у 1963)	<b>DEPAR</b>	ENT OF THE INTE	RIOR verse side)	$\mathcal{A}$
	Gi	EOLOGICAL SURVEY		6. HANDAN, AZHOTTEE OR TRIBE NAME
CLINID	NOTION	CES AND REPORTS	ON WELLS 🕺 📈:	$\mathcal{L}'$
SUND	orm for proposa	ls to drill or to deepen or plu	ng back to a different reservoir. h proposals.)	
(Do not use this re	Use "APPLICAT	CION FOR PERMIT—" for suc	in proposais.	7. UNIT AGREEMENT NAME
WELL GAS WELL	OTHER	Injection		8. FARM OR LEASE NAME
NAME OF OPERATOR		TBleccion		
			<u> </u>	9. BEAMAN
Constal of America	can Ull C	ompany of Texas		
		11- New Marten	ony State requirements.*	10 AND POOL, OR WILDCAT
See also space 17 below	port OCCond	olds and excellent Coith	any state requirements.	
At surface				11. T. T. T. T. T. T. A. AND
1	980' FSL	and 1978' FWL of	Section 13,	SURVEY OR AREA
•	Two. 1	6-8, Rge. 29-E.	·	
		15. ELEVATIONS (Show whether	or DE RT GR etc.)	12. COUNTY OR PARISH 13. STATE
PERMIT NO.		15. ELEVATIONS (Show whether	er br, ki, da, cool,	
			730' DF	Eddy Rell.
	Check An	propriate Box To Indicat	te Nature of Notice, Report,	or Other Data
			į st	UBSEQUENT REPORT OF:
N	OTICE OF INTEN	TION 10.		REPAIRING WELL
TEST WATER SHUT-OF	rr I	PULL OR ALTER CASING	WATER SHUT-OFF	
FRACTURE TREAT		MULTIPLE COMPLETE	FRACTURE TREATMENT	
SHOOT OR ACIDIZE	*	ABANDON*	SHOOTING OR ACIDIZING	G
REPAIR WELL		CHANGE PLANS	(Other)	results of multiple completion on Well
			NOTE: Report	lesures of many
(Other)  DESCRIBE PROPOSED OR proposed work. If nent to this work.) *	MCII ID GILCOM	CRATIONS (Clearly state all per onally drilled, give subsurface	Completion or R	dates, including estimated date of starting vertical depths for all markers and zones pe
proposed work. In nent to this work.) *	L. Tuest	injection well w	Completion or R	dates, including estimated date of starting vertical depths for all markers and zones pe
proposed work. In nent to this work.) *	L. Tuest	injection well w	tinent details, and give pertinent locations and measured and true	dates, including estimated date of starting vertical depths for all markers and zones pe
proposed work. In nent to this work.) *	L. Tuest	injection well wition rate. Well w	tinent details, and give pertinent locations and measured and true	dates, including estimated date of starting vertical depths for all markers and zones pe
proposed work. In nent to this work.) *	L. Tuest	injection well wition rate. Well w	tinent details, and give pertinent locations and measured and true	dates, including estimated date of starting vertical depths for all markers and zones pe
Proposed Work.)*  Proposed Work  R. I hereby certify tha	k: Treat injec	injection well wition rate. Well well well well well well well well	tinent details, and give pertinent locations and measured and true	dates, including estimated date of starting vertical depths for all markers and zones per depth depths depth depth depth depths depth
Proposed Work.)*  Proposed Work  I hereby certify tha	k: Treat injec	injection well wition rate. Well well well well well well well well	tinent details, and give pertinent locations and measured and true it had been active and the control of the co	dates, including estimated date of starting vertical depths for all markers and zones per depths for zones per d

\*See Instructions on Reverse Side