DEFAR	UNGED STATE		CATE TO STATE OF TO ST
DEFAR	TMEL OF THE	MODELOR "	Te profession same and similar
GEOLOGICAL SURVEY			NM-02425 6 DESIGNATION AND OTHER OR THE MANY
offers these this form for pro-		ORTS ON WELLS nor plum back to a different reservoir. for such proposals.)	
1.			7. UNIT AGREEMENT NAME
GIL GAB WELL OTHER 2. NAME OF OPERATOR	WIW	RECEIVED	Square Lake Flood (West
HENMONT OIL COMPANY OCT 6 1978			Evans "A"
3. ADDRESS OF OPERATOR	- No. Houtes 00	210	9. WELL NO.
P.O. Dox 1305, Artesia, New Mexico 88210 4. Location of Well (Report location clearly and in accordance with any State Equilaries See also space 17 below.) ARTESIA, OFFICE			10. FIELD AND POOL, OR WILDCAT
			SQUARE LAKE (G.SA)
1980' FSL & 660' FWL	of Costion 22		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
1300, L2F & 000, LMF	or section 55		33=16S-30E NMFM
14. PERNIT NO. 15. ELEVATIONS (Show		whether pr, RT, GR, etc.)	12. COUNTY OR PARISH 18. STATE
	3729'	GLM	Eddy Hew Mexic
16. Check	Appropriate Box To In	dicate Nature of Notice, Report	t, or Other Data
NOTICE OF INTENTION TO:		1	BUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE ABANDON®	FRACTURE TREATMENT BHOOTING OR ACIDIZI	
REPAIR WELL	CHANGE PLANS		ary Abandonment XX
(Other)		(Norr: Report Completion or F	results of multiple completion on Well Recompletion Report and Log form.)
		roval for Temporary Aba or tertiary recovery op	
inis property	is ander study in	or tertrary recovery of	erations.
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		U.S. Esla	
		ARILO	
18. I hereby certify that the foregoing	is true and correct	Office Manager	9/29/78
SIGNED STATE OF SE	Sengel TIT	TLETITCE HEHAGET	DATE 3/23/70
(This space for Federal or State of	office use)		_
ALPROVED BY JOSE C	J. Jara TIT	LE ACTING DISTRICT ENGI	NEER DATE OCT - 4 1978

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICAL USE OR PLUGGED BY*See Instructions on Reverse Side
APRIL OCTOBER 197
UCT 1-7979