| Formerly 9–331) DEPARTMENT | STATES THE INTERIO AD MANAGEMENT | SUBMIT IN TRIPLIC (Other instructions of verse side) | G. LEAS | ndget Bureau No cpires August 31 E DESIGNATION AN C 063578 | , 1985 |
|--|----------------------------------|--|-----------------|---|------------------------|
| SUNDRY NOTICES A | | |) | DIAN, ALLOTTEE OF | R TRIBE NAME |
| OIL GAS WELL OTHER NAME OF OPERATOR Vinceid & Margan Dwilling | Company | AUG 18 '8 | Q | OR LEASE NAME | Foderal |
| Kincaid & Watson Drilling (DDDEES OF OPERATOR P.O. Box 498, Artesia, New Location of Well (Report location clearly and i See also space 17 below.) At surface | Mexico 88211-04 | 98 O. C. D. | 9. WHELE | | ILDCAT |
| 2310'/South, 2310'/West Section 34-16S-28E, Eddy Co | ounty, New Mexic | o | 11. SRC | Take Quee , T., B., M., OR BLE. JEVBY OR ARMA -16S-28E | AND |
| 14. PERMIT NO. 15. ELEVA | 3578 GR | , GR, etc.) | 12. coo Edd | | B. STATE New Mexico |
| 16. Check Appropriate NOTICE OF INTENTION TO: | Box To Indicate Nati | ure of Notice, Report, | or Other Da | | |
| | | | | | |
| FRACTURE TREAT PULL OR ALT | | WATER SHUT-OFF FRACTURE TREATMENT | | ALTERING CASIN | 11 |
| SHOOT OR ACIDIZE ABANDON® | | SHOOTING OR ACIDIZING | G | ABANDONMENT* | X |
| REPAIR WELL CHANGE PLA | NS - | (Other) | | | |
| (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (C. | | Completion or Re | ecompletion Rep | le completion on ort and Log form.) | |
| We plugged this well as fo 15 sacks class C cement 14 35 sacks cement 660'-637' 60 sacks cement 580'-306' | | | | | |
| 60' at surface. Loaded hole with jelled mu | d hotroon place | | | | |
| Cleaned up, ripped up and Set dry hole marker. | | | | 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
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| | | | | | e E |
| | | | | | Opt ID-: |
| | | | | | 8-26-88 P+A |
| 18. I hereby certify that the foregoing is true and o | | Two courses | | 8-3-88 | |
| SIGNED / CARLOT | TITLE Secre | etary-Treasurer | D. | ATE | |
| (This space for Federal of State office use) | | | - | 8-1 | 16.88 |
| APPROVED BY CONDITIONS OF APPROVAL, IF ANY: | TITLE | | DA | \TE | |