SUNDRY NOTICES AND REPORTS ON WELLS  (The not use this force of Particle Strong Particles from the control of t	Form 9-331 (May 1963)	NITED STATES EPARIMENT OF THE IN GEOLOGICAL SURV		TE* Form approved. Budget Bureau No. 42-R1 5. LEASE DESIGNATION AND SERIAL: NM 0110705
Control   Cont	SUNDR (Do not use this form	Y NOTICES AND REPORT for properate to deepen of "APPLICATION FOR PERMIT—" for	RTS ON WELLS or plug back to Edifer of Esemble.	6. IF INDIAN, ALLOTTEE OR TRIBE NO
WESTERN DIL Producers, Inc.  S. Admirance for Conservant  B. NAME of CONSERVANT  D. O. BOX 2055, Roswell, New MexagreePBSTIDE  1 Supplementary of the Conservant of Conservation of Conservant of Conservation of Conservant of Conservation of Conservant of Conservation of Conservant of Conservation of Conservant of Conservation of Conservant of Conserva	1.			7. UNIT AGREEMENT NAME
Secretary of the production   Secretary	WELL WELL LA	OTHER	NOV 6 1972	S BIBN OF LEAST MANY
A DECEMBER OF OWNERING  P. D. BOX 2055, Roswell, New Moxamatis PREMISTICE  1 D. Box 2055, Roswell, New Moxamatis Premistration of the Company		1 Droducere Inc		<b>1</b> .
* Locations for National Contraction clearly and in accordance with any State requirements.*  1980' FN&UL Sec. 20, T-165, R-27E  1980' G.L. 3462  1980' Gheck Appropriate Box To Indicate Nature of Notice, Report, or Other Do'd Source of Notice of Prevention Notice of Notice, Report or Other Do'd Source of Notice of Notice, Report of Prevention of Notice o	3. ADDRESS OF OPERATOR		0.6.5	
See also space IT below.)  1980' FN&UL Sec. 20, T-165, R-27E  1980' FN&UL Sec. 20, T-1	P. O. Box	2055, Roswell, New	Meximos B8201	1
1980' FN&WL Sec. 20, T-165, R-27E    Sec. 20-165-27E   Sec. 20-165	See also space 17 below.)	t location clearly and in accordance w	ith any State requirements.*	missing the state of the state
14. FERNIT NO.  15. SEPARTONS (Show whither Pr. Rt. OR, etc.)  16.  17. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Source or Intention To:  TEST WATER SHUT-OFF  TREATT WATER	1980' FN&U	JL Sec. 20, T-16S,	R-27E	SURVEY OR AREA
C.L. 3462  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Source of Internation to:  Source of Internation to:  THEST WATER SHUT-OFF PRACTICES THEAT SHOOT ON ACCIDENT ANAMONY (Other)  17. DESCRIPTION OF PRACTICES THEAT SHOOT ON ACCIDENT ANAMONY SHOOT ON ACCIDENT THE CONTRIBUTION OF ACCIDENT ANAMONY SHOOT ON ACCIDENT THE CONTRIBUTION OF ACCIDENT ANAMONY SHOOT ON ACCIDENT THE CONTRIBUTION OF ACCIDENT ANAMONY  17. DESCRIPTION OF ACCIDENT ANAMONY SHOOT OF ACCOUNTY SHO	14. PERMIT NO.	15. ELEVATIONS (Show wh	nether DF, RT, GR, etc.)	
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  **SOZICE OF INVENTION TO:  ***********************************			,,,	
SOUTH OF INTERVIENT TO:  THEST WATER SHUT-OFF STATE CASING MULTIPLE COMPLETE PRACTURE TREAT ALTERING CASING MULTIPLE COMPLETE SHOOT OF ACTORS ALTERING CASING MULTIPLE COMPLETE SHOOT OF ACTORS ALTERING CASING MULTIPLE COMPLETE SHOOT OF ACTORS ALTERING CASING MULTIPLE COMPLETE CHANGE PLANS (Other)  17. DESCRIPT PROPORED OF COMPLETED DEPERTIONS (Clearly state all pertinent details, and site pertinent data, including stimeted date of election proposed over. If well is directionally drilled, sive subsurface locations and measured and true vertical depths for all markers and zones nent to this work.)  11. 24.71  17. D. 8655;  Went in hole open ended w/drill pipe, spotted cement plugs as follows: 8160'-8040' 40 sx. 6900'-6800' 30 sx. 4800'-4700' 30 sx. 2700'-2600' 30 sx. 1450'-1350' 30 sx. 2700'-2600' 30 sx. Well plugged and abandoned 7:30 a.m. 11-24-71, pits filled, location cleaned up and ready for inspection.  DEC29 1971  18. I hereby certify that the frequing is true and correct signed and abandoned 7:30 a.m. 2000	18		AND CALC. D.	
PRACTURE TREAT BRANDEN ALTERING CASING ABANDON'S BEFORE SETAIR WELL  CHANGE FLANS  (Other)  (				
BROOT OR ACIDIZE  BEATH WILL  CHANGE PLANS  CHANGE PLANS  COUNTY CHANGE PLANS  CHANGE PLANS  COUNTY CHANGE PLANS	TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
(Other)  (Now: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)  (Other)  (Other)  (Other)  (Now: Report results of multiple completion to Well Completion or Recompletion Report and Log form.)  (Other)  (Other)  (Now: Report results of multiple completion to Well Completion Report and Log form.)  (In continuous log of the proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones are the proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones are the proposed work. If well a pr			-	
(Other)  (Other)  (Other)  (One)  (On	j-	<del></del>		ABANDON MENT
17. DESCRIBE PROPOSED OS COUPLEZED OFERAZIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of shorting proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones near to this work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones near to this work. If June 11-24-71  1. D. 8665¹  Went in hole open ended w/drill pipe, spotted cement plugs as followed by the proposed of the second sec			(Note: Report res	ults of multiple completion on Well
SIGNED TITLE Supt.  (This space for Federal or State office use)  APPROVED TO APPROVAL, IF ANY:  *See Instructions on Reverse Side	Went in ho 8160'-8040 6900'-6800 4800'-4700 2700'-2600 1450'-1350 Surface Well plugg	' 40 sx. ' 30 sx. ' 30 sx. ' 30 sx. ' 30 sx. 10 sx. ed and abandoned 7:	:30 a.m. 11-24-71, pection.	
APPROVED TO DATE  CONDITION OF APPROVAL, IF ANY:  *See Instructions on Reverse Side		n Me	в Supt.	DATE 12-28-71
CONDITION OF APPROVAL, IF ANY:  1972  *See Instructions on Reverse Side	(This space for Federal o	r State office use)		
*See Instructions on Reverse Side			Е	DATE
The EXMINISTRATION OF THE PROPERTY OF THE PROP	CONDITIONS OF APPRO	VAL, IF ANY:		
	BEEKINA	*See Instr	uctions on Reverse Side	हिन्द्र <b>ः ५ - ९</b> १