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Form 9-331 (May 1963)L TED STATES DEPARTMENT OF THE INTERIORSUBMIT IN TR (Other instructions on re- verse side)			5. LEASE DESIGNATION AND SERIAL NO.
	GEOLOGICAL SUF		NM 9987 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	for proposals to drill or to deeper "APPLICATION FOR PERMIT-"	ORTS ON WELLS A or plug back to a different reservoir. for such proposals.)	
1. OIL GAS GAS WELL .	OTHER	RECEIVED BY	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	/	0.0 1097	8. FARM OR LEASE NAME
Fred Pool 3. Address of Operator	Drilling, Inc.	APR 20 1987	Max Federal 9. well NO.
4. LOCATION OF WELL (Report See also space 17 below.)	93, Roswell, N.M. location clearly and in accordance	88201 O. C. D. with any State requirements from	4
Atsurface 2310 FSL a	nd 1076' FWL		East Red Lake - 11. sec., T., B., M., OR BLK. AND SUBVEY OR AREA
			Sec. 30-T16S-R29E
14. PERMIT NO.	15. ELEVATIONS (Show 3680' GR	whether DF, RT, GR, etc.)	12. COUNTY OF PARISH 13. STATE Eddy N.M.
16.	heck Appropriate Box To In	idicate Nature of Notice, Report, or	
NOTICE	E OF INTENTION TO:	SUBS	EQUENT REFORT OF :
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTUBE TREAT SHOOT OR ACIDIZE	MULTIPLE COMPLETE ABANDON*	FRACTURE TREATMENT SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other) 2 casing	
(Other)		(Note: Report resu Completion or Recor	its of multiple completion on Well npletion Report and Log form.)
17. DESCRIBE PROPOSED OR COMP proposed work. If well nent to this work.) *	PLETED OPERATIONS (Clearly state a is directionally drilled, give subst	ul pertinent details, and give pertinent dat arface locations and measured and true ver	es, including estimated date of starting any cical depths for all markers and zones perti-
April 1	Cemented	. Set 2410' of $4\frac{1}{2}$, 9 With 300 sx HLC and culated 18 sx to surf p.m.	180 sx 50/50
	Intend t	to perforate and acidi	ze well.
		N	
18. I hereby certify that the	foregoing is true and correct		
signed	To Close	TLEVice_President	DATE 4-16-87
(This space for Federal o	r State office use)		
APPROVED BY		TLE	DATE
CONDITIONS OF APPRO	VAL, IF ANY:		
	*See 1	nstructions on Reverse Side	
	066 11		