per 1983 RECEIVE	UNITED STA S	SUBMIT IN TRIPLICATES (Other instructions on re-	raget Bureau No. 1004 xpires August 31, 198	4-0135
1y 9-331) "DEFAYET	MENT OF THE INTER	M Ingree alder	5. LEASE DESIGNATION AND SERI	AL NO.
BURE	AU OF LAND MANAGEMEN	rawer DD COMMISSION	NM 2747	
CILLIE	RES AND REPORTS	STESWELL'S 88210	6. IF INDIAN, ALLOTTEE OR TRIB	E NAME
(Do not use this form for propo		O		
	sals to drill or to deepen or plug that ATION FOR PERMIT—" for such p	roposals.)		
ARTESIA, OF			7. UNIT AGREEMENT NAME	
WELL X OTHER	* Water Injection We	e11 ·	,	
OF OPERATOR			8. FARM OR LEAST NAME	
Burnett Oil Co	Inc		Jackson "B"	
LSS OF OPERATOR	,		9. WELL NO.	
1500 InterFire	t Towar 801 Charry	Stroot Et Houth To-	15	
rion of Well (Report location of	t Tower 801 Cherry Sclearly and in accordance with any	State requirements. 76102	10. FIELD AND POOL, OR WILDCAT	r
irface			Sq. Lake (GB-SA)	
			11. SEC., T., E., M., OR BLE. AND	
Unit Letter L,	BURYDY OR ARMA			
Sec. 1-17S-30E	1-17S-30E			
IT NO.	15. BLEVATIONS (Show whether DF	, RT, GR, etc.)	12. COUNTY OR PARISH 13. STA	TR
	3707 GR		Eddy Co., N.N.	1.
	D 7			
Check A	opropriate Box to Indicate N	ature of Notice, Report, or Ot	her Data	
NOTICE OF INTER	TION TO:	впрявидов	NT REPORT OF:	
WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL	\neg
CTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	-
OT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT®	-
IR WELL X	CHANGE PLANS	(Other)	and and a second	-
er)		(NOTE : Report results of	f multiple completion on Well ion Report and Log form.)	_1
John G.—McPhau	true and correct	ODUCTION SUPERINTENDEN	T DATE 8-20-85	
oven By	TITLE		DATE 9-1785	
ITIONS OF APPROVAL, IF A	NY:			
Subje	ect to		Min Mag Singapan	