

DEPARTMENT OF THE INTERIOR (Attach Instructions on Reverse side)
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back. Use "APPLICATION FOR PERMIT" for such proposals.)

1. NAME OF LESSEE Oil Production Company		2. LEASE DESIGNATION AND SERIAL NO. NM 074937	
3. DATE OF NOTICE JUN 28 1978		4. IF INDIAN, ALLOTTEE OR TRIBE NAME	
5. NAME OF OPERATOR Oil Production Company		6. UNIT AGREEMENT NAME	
7. FARM OR LEASE NAME Federal		8. WELL NO. 3	
9. FIELD AND POOL, OR WILDCAT 3 - 178 - 112		10. FIELD AND POOL, OR WILDCAT	
11. SEC., T., R., N., OR B.L. AND SURVEY OR AREA 3 - 178 - 112		12. COUNTY OR PARISH El Paso	
13. ELEVATIONS (Show whether DF, RT, GN, etc.) 3726 CL		14. STATE New Mexico	

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

STOP WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOTING OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other)	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

7. INDICATE RECORD OR COMPLETE OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any subsequent work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

On January 4, 1978 our request to convert this well to water injection was approved. Accordingly the allowable on this well was canceled at that time.

We would like the allowable reinstated until the well is converted, at which time appropriate forms will be submitted.

An allowable of 20 barrels of oil per day is requested.

I, James J. Smith, certify that the foregoing is true and correct

SIGNED James J. Smith TITLE Area Supervisor DATE June 28, 1978

(Name of person for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

COMMENTS OF APPROVAL, IF ANY: