	1) 1993)	TED STATES SUBMIT IN TIPLIC (Other inst ) 108 (O	CATE - Form approved. Budget Bureau No. 42-R1 5. LEASE DESIGNATION AND SERIAL 1
-		OGICAL SURVEY	LC 029395 (b)
		AND REPORTS ON WELLS drill or to deepen or plug back to a different reservoir. FOR PERMIT—" for such proposals.)	6 IF INDIAN, ALLOTTEE OR TRIBE NA
1.	oil GAS OTHER Wat	er Injection Well	7. UNIT AGREEMENT NAME
2.	NAME OF OPERATOR Atlantic Richfield (	8. FARM OR LEASE NAME Turner "B"	
3.	P.O. Box 1978, Roswell, New Mexico 88201		9. WELL NO
4.	LOCATION OF WELL (Report location clearly See also space 17 below.) At surface	F WELL (Report location clearly and in accordance with any State requirements.* ace 17 below.)	
	330' FNL, 660' FWL		Grayburg-Jackson 11. BEC. T. B. M., OB BLE. AND BURVEY OR AREA Sec. 20, T17S, R3
14.	PERMIT NO. 15.	ELEVATIONS (Show whether DF, BT, GR, etc.) 3666 * Grd.	12. COUNTY OR PARISH 13. STATE Eddy N.M.
16.	Check Approp	riate Box To Indicate Nature of Notice, Report	Seas From Sign Server St.
	NOTICE OF INTENTION	ro:	UBSEQUENT REPORT OF: 30 20
	FRACTURE TREAT MULTII	OR ALTER CASING WATER SHUT-OFF PLE COMPLETE FRACTURE TREATMENT	1—1 : : : : : : : : : : : : : : : : : :
		E PLANS (Other)	ABANDONMENT*
	(Other) Run 4½" Inner St	tring X (Note: Report Completion or R	results of multiple completion on Well ecompletion Report and Log form.)
	3300, 3302, 3304, 3345, 3349, 3352,	e the Jackson zone w/one 0.4 3310, 3312, 3322, 3324, 332 3357, 3359, 3395, 3398, 340 24 (23 holes, GR-N log). Trund ball sealers. Run 2-3/8"d annulus w/treated fresh wawork will start about 12/8/	6, 3328, 3333; 33 3, 3412, 3413; 35 eat w/3000 gallons tubing w/packer ter and resume 5 69.3333 2 2 2 3
	RECEIVE		inthing property of the color o
	NOV 2 6 1969	NOV25	ndus to italiant to italiant to italiant to italiant to caption to the control of
	J. C. C. ARTESIA, OFFICI		tonglesh to design of the control of
18.	I hereby certify that the foregoing is true	and correct TITLE Dist. Drlg. Super	visor pare 11-24-69
==	(This space for Federal or State office use		
	APPROVED BY	TITLE	T: Levens?  Raibn bas  I bas wai o  I to 1974  II: bas  I
	080/15/		
	CONDITIONS OF APPROVAL, IF ANY:	*See Instructions on Reverse Side	