	I INTTT	ED STATES			CONS COMMISSION	1
'orm 3160-5 June 1990)			 ת	Drawer		C١
		OF THE INTERIO		Artesi	a, NM 88210	
	BUREAU OF LA	AND MANAGEMEN	NT		FORM APPROVED Budget Bureau No. 1004-0135 Expires March 31, 1993	
SL	UNDRY NOTICES	AND REPORTS ON W	ELLS	5. Leas	e Designation and Serial No.	
not use this form for	proposals to drill or	to deepen or reentry to	o a different reservoii	r. LC 02	9435-A	
Use "/	APPLICATION FOR	R PERMIT- for such	proposalş	6. If Inc	lian, Allottee or Tribe Name	
	SUR MIT I			NA.		
					it or CA, Agreement Designati	ion
Type of Well	Other			NA		
Well Well Name of Operator			DEC 2	0 312-11	Name and No.	
	PERATING CORPORAT	ION		7 . 94	eel *A" #20 Haul	
Address and Telephone No.			0. c	. D. 9. API	Well No.	
20 NORTH BROADV	NAY, SUITE 1500, OKLA	HOMA CITY, OKLAHOMA	73102 (405)552 4530 81A			
ocation of Well (Footage. Sec.	, T., R., M., or Survey Desc	ription)		10. Field	and Pool, or Exploratory Area	a
200' FNL & 1480' FEL, Unit B, Sec. 7-17S-31E					GRAYBURG-JACKSON	
	·		UTB	11. Cou	nty or Parish, State	
				Eddy C	Co., NM	
		TO INDICATE NATU			OTHER DATA	
TYPE OF SUBMIS	SION	····	TYPE OF ACT	ION		
Notice of Intent		Abandonment		Chang	ge of Plans	
		Recompletion		New (Construction	
					Routine Fracturing	
Subsequent Report		Plugging Back		Non-F	couline rracturing	
• •		Casing Repair		Water	Shut-Off	
Subsequent Report Final Abandonment Notice		Casing Repair Altering Casing	g	Water	Shut-Off rsion to Injection	
		Casing Repair	g	Water Conve Dispos	Shut-Off rision to Injection se Water	
Final Abandonment Notice	perations (Clearly state all pertin	Casing Repair Altering Casing Other <u>TD'd &</u>	g set prod csg	Water	Shut-Off rsion to Injection se Water results of multiple completion on Well Recompletion Report and Log form.)	
Final Abandonment Notice	perations (Clearly state all pertin vertical depths for all markers at	Casing Repair Altering Casing	g set prod csg	Water	Shut-Off rsion to Injection se Water results of multiple completion on Well Recompletion Report and Log form.)	
Final Abandonment Notice Describe Proposed or Completed Op locations and measured and true	perations (Clearly state all pertin vertical depths for all markers at 1:00 a.m., 11/29/94	Casing Repair Altering Casing Other TD'd & ent details, and give pertinent dates, nd zones pertinent to this work.)*	g set prod csg	Water Conve Note: Report Completion of g any proposed work.	Shut-Off rsion to Injection se Water results of multiple completion on Well Recompletion Report and Log form.)	
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any matter within its jurisdiction.