•		GEOLOGICAL SU			6. IF INDIAN, ALLOTTEE OR TRIP
S (Do not use	this form for prop	DTICES AND REP posals to drill or to deepe CATION FOR PERMIT-	n or plug back for such propo	to a different reservoir. sals.)	
1.				RECEIV	7. UNIT AGREEMENT NAME
OIL X GA	LL OTHER				8. FARM OR LEASE NAME
2. NAME OF OPERAT			V.	DC0 6 107	Empire Abo Unit P
Atlant 3. ADDRESS OF OPEN	ic Richfiel	d Company		DEC6 197	9. WELL NO.
P. O.	Box 1710, H	lobbs, New Mexic	co 88240	<u> </u>	6 10. FIELD AND POOL, OR WILDC.
4. LOCATION OF WE See also space 1	LL (Report location	n clearly and in accordance	e with any Sta	ARTESIA, OFFIC	YE .
At surface					Empire Abo 11. sec., T., B., M., OR BLK. AND SURVEY OR ABEA
		our (Init latto	n N)		9-18S-27E
660'FS	ЧГ № ТА80, Т	FWL (Unit lette			12. COUNTY OR PARISH 13. ST
14. PERMIT NO.		15. ELEVATIONS (Show		, GR, etc.)	Eddy N.
			3508'DF	/ L L	1 2009
16.	Check /	Appropriate Box To I	Indicate Nat		
	NOTICE OF IN	TENTION TO:		1	SUBSEQUENT REPORT OF:
TEST WATER S	AUT-OFF	PULL OR ALTER CASING		WATER SHUT-OFF	T ALTERING CASING
FRACTURE TREA	.т	MULTIPLE COMPLETE		FRACTURE TREATMEN	
SHOOT OR ACID	IZE	ABANDON*		(Other) Shut-it	n.Allowable Transferred
REPAIR WELL	LÌ	CHANGE PLANS		(Monn + Donort	results of multiple completion on Well Recompletion Report and Log form.)
Also	holding for	secondary reco	,very.		
				NEL	
				RECEIVER OCT 291974	
			Ţ	RE- 01974	
				DCT . SI	JRVEY
				TOLOGICAL ME	XICO
				OCT 2 9 191 V U. S. GEOLOGICAL SI ARTESIA, NEW ME	
				HUIT	
1	y that the foregoi	ing is true and correct	Dis	t. Prod. & Drla	g. Supt. DATE October 3
SIGNED	or Federal or State			MUST	DATE
(This space for			طسلقائلا فالبلالا		
	OF APPROVAL,	IF ANY: APPI	ROVED.	GED BT	
	OF APPROVAL,	IF ANY: UNLESS FURTHER APPE BE PUT TO BENEFICAL BE PUT TO BENEFICAL APRIL OCTO OFT 19 *See	USE 975	GED BI	