							CISE	
Form 9-331		U .ED STA	TES	MN OUTBREIMSK TO	ISSTO	Form appro Budget Bur	$\mathbf{U}_{\mathbf{I}}$	
(May 1963)	DEPART	MENT OF TH		DRammer Bie)	, "ơn" ' t iệ-"	G. LEABE DENIGNATION	N AND BERIAL NO.	
	(SEOLOGICAL S	URVEY	Artesia, NM 882	10	LC-0511		
C(1)	NOT	ICES AND RE	PORTS	ON WELLS		6. IF INDIAN, ALLOTT	KE OR TRIBE NAME	
JUI (Do not use thi	a form for propo	nals to drill or to de	pen or plug	back to a different reservo	ir.			
1.	Use "APPLIC	ATION FOR FERMIN		RECEIVED		7. UNIT AGREEMENT N		
OIL CAB	OTRES	(07(0	- TA			LOCO HIL.	LS FLOOD	
2. NAME OF OPERATOR	CJ OTRER	WIW		SEP 2 1982		8. FARM OR LEASE NA	ME	
ΝΕωΜΟ	ONT OIL CON	(PANY		~ .coL			rd "B"	
8. ADDRESS OF OPERATO			0. C. D.		9. WELL NO.			
P. O. BOX 1305 ARTESIA, NEW MEXICOARTESES 2101CE						10. FIELD AND POOL, OR WILDCAT		
4. LOCATION OF WELL (See also space 17 be At surface	low.)					LOCO HILLS	(O, G, SA)	
						11. BDC., T., R., M., OR BLK. AND BURVEY OR AREA		
330' FNL 2310' FEL Sec. 1-18-29						Sec. 1-18-29		
						12. COUNTY OF PARIS		
14. PERMIT NO.		15. ELEVATIONS (Sh		F, RT, GR, etc.) 557 -		1		
		<u> </u>				EDDY	NEW MEXICO	
16. Check Appropriate Box To Indicate Nature of Notice, Report, or C)ther Data		
						DENT REPORT OF:		
TEST WATER SHUT-		PULL OB ALTER CASING		WATER SHUT-OFF		REPAIRING	WELL	
FRACTURE TREAT	I	MULTIPLE COMPLETE		FRACTURE TREATME	.NT	ALTERING C		
SHOUT OR ACIDIZE		ABANDON®	XX	SHOOTING OR ACIDI	ZING	ABANDONNE	•TR	
REPAIR WELL		CHANGE PLANS		(Other)(NOTE: Report	rt results	of multiple completion	on Well	
(Other)		NATIONE (Clearly stat		t details and size parting	nt dates	etion Report and Log fo including estimated da	te of starting any	
nent to this work)	• cient ceme	nt across pr	oducina	interval to tie	back .	to production	string	
2. Perforate	base of sa	lt @ 1045'	and squ	reeze with 50 sa	cks ce	ment leaving i	100' plug	
in casino			_					
		t@459'	and	squeeze with 50	sacks	cement leaver	ig 100° plug	
in casing.	h and the	Pue A water	o tuino	surface and pro	ductio	n casina taara	thor.	
4. Set 15 sac 5. Erect perm	r cemeni p anent well	marker	e iying			n cushig roger		
Note: (a)	Vour of	fice will be	notifie	ed 24 hrs. prior	to op	erations		
(b.) All plu	as will be v	erified					
(c. (d)) Hole wi	Il be loaded ot plan to p	betweer	all plugs with casing	10# M	ud		
					57	n we ret with the	725 1	
					i i i i i i i i i i i i i i i i i i i	ار به با در از با در از بالی است می است کر الک 		
						<u></u>	32	
:						OLM G\$S U.S. GEOLOGICALI COMELL NEW M		
18. I hereby certify that	t the foregoing is		,	Area Manager		DATE7/28	/ 8 2	
SIGNED Enge	A John	NIED	TITLE					
(This space for Fed	eral of State of	te use)	····					
APPROVED BY CONDITIONS OF A	Ded.) PETER - PPROVAL, IF A SEP	W. CHESTER	TITLE			DATE		
	FOR IAMES A		Instruction	s on Reverse Side				

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