Form 9-331 (May 1963)	UNITED STATES	NH OIL CONSINCEN IS	C/SP Form approved. Budget Bureau No. 42-R1424.
DE	PARTMENT OF THE INT		5. LEARE DEBIGNATION AND BERIAL NO. $LC - 051102$ (b)
SUNDRY	NOTICES AND REPOR	TS ON WELLS	G. IF INDIAN, ALLOTTEE OR TRIBE NAME
	for proposals to drill or to design or "APPLICATION FOR PERMIT_" for	such proposals. RECEIVED	7. UNIT AGREEMENT NAME
J. OIL GAB WELL U	OTHER WIW - T	A	LOCO HILLS FLOOD
2. NAME OF OPERATOR		SEP 2 1982	8. FARM OR LEASE NAME
	IL COMPANY	<u> </u>	Ballard "B"
R ADDRESS OF OPERATOR P. O. BOX	1205 ADTESTA NEULA	MEXICO ARTES & 200 FICE	6
P. U. DUA LOCATION OF WELL (Report See also space 17 below.)	location clearly and in accordance with	h any State requirements.*	10. FIELD AND POOL, OR WILDCAT
At surface			LOCO HILLS (O. G. SA) 11. BEC., T., R., M., OR BLE. AND BURVEY OR AREA
2310' FN	IL 1650'FEL S	ec. 1-18-29	Sec. 1-18-29E
14. PERMIT NO.	15. ELEVATIONS (Show wheth		12. COUNTY OR PARISH 13. STATE
	335	4 '	EDDY NEW MEXICO
6. Cl	neck Appropriate Box To Indica	ite Nature of Notice, Report, o	or Other Data
NOTICE	OF INTENTION TO:	S UB1	BEQUENT REPORT OF:
TEST WATER BEUT-OFF	- PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	ABANDON®	FRACTURE TREATMENT SHOOTING OR ACIDIZING	ALTERING CASING
REPAIR WELL	CHANGE PLANE	(Other)	
(Other)		Completion or Reco	ults of multiple completion on Well mpletion Report and Log form.) tes, including estimated date of starting any
casing seat, or 2. Perforate base in casing. 3. Perforate top o in casing. 1. Set 15 sack cen	of salt @ <u>1135'</u> and 405' P.H.C. of salt @ 150 ' a ment plug @ surface tyi	casing seat and cap wi squeeze with 50 sacks nd squeeze with 50 sac	ith 25 sack cement plug. cement leaving 100' plug ks cement leaving 100' plug
5. Erect permanent	t well marker	. ·	
(b.) Al	our office will be noti Il plugs will be verifi ple will be loaded betw	ed	
	e do not plan to pull a		
			UL 0 1982
: .			OB & CAS U.S. OEOLOGICAL SURVEY NGSWELL, NOV ¥5200
8. I hereby certify that the for SIGNED Engel	egoing is true and correct	Area Manager	DATE 7/28/82
(This space for Federal of	Sair oned use	······································	
APPROVED BY CONDITIONS OF APPROVA	TTER W. CHESTER AL, IF ANY: EP 1 1982		DATE
FOR		ions on Reverse Side	

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DISTRICT SUPERVISOR