Form 9-331	N. M. UN TD STATES	C. C. C. COPY SUBMIT IN TRIPI	re Form approved. Budget Bureau						
DEPARTMEN & OF THE INTERIOR (Other Instructions GEOLOGICAL SURVEY			re- 5. LEASE DESIGNATION AND SERIAL NO. NM-025623						
			6. IF INDIAN, ALLOTTEE OR TRIBE NAME						
	NOTICES AND REPORTS proposals to drill or to deepen or plus PLICATION FOR PERMIT—" for such								
I. OIL GAS OTHER WIW			7. UNIT AGREEMENT NAME West Loco Hills Grb.#4 Sd U						
NAME OF OPERATOR RECEIVED			8. FARM OR LEASE NAME Tract 22						
					. ADDRESS OF OPERATOR	tacia New Maxico 88210	DEC 3 -) 1974	9. WELL NO.	
P.O. Box 1305, Artesia, New Mexico 88210 DLC 99 1574 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface D.C.C. ARTESIA, DFFICE			10. FIELD AND FOOL, OR WILDCAT LOCO Hills 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA						
					660' FSL & 1980' FN	IL of Section 7		7-185-30E	NMPM
					4. PERMIT NO.	15. ELEVATIONS (Show whether	DF, RT, GR, etc.)		13. STATE
	3527' GLM		Eddy N	lew MExico					
. Chec	k Appropriate Box To Indicate	Nature of Notice, Report, c	or Other Data						
	INTENTION TO:		SEQUENT REPORT OF:						
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WEI						
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASI	NG					
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDON MENT*	·					
REPAIR WELL	CHANGE PLANS	(Other)	ults of multiple completion on	Well					
(Other) Return Vell	TO Ilijection XX ED OPERATIONS (Clearly state all pertin directionally drilled, give subsurface lo	Completion or Reco	ompletion Report and Log form.	.)					
12-10-74 This well	returned to injection	at 50 BPD rate.							
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			RECEIVE DEC 27 1974 ARTESIA DEC 27 1974						
			CEIVE	-					
			DECON	U I					
			U.S. GEO. 1974						
			ARTESIA NOGICAL OW	.5					
			NEW MEXICEY						
8. I hereby certify that the foreg	oing is true and correct		U.S. GEOLOGICAL SURVEY ARTESIA, NEW MEXICO	<u> </u>					
SIGNED Charles	C Joy_ TITLE_	Superintendent	DATE12/27/						
(This space for Federal or St									
APPROVED BY			DATE						
CONDITIONS OF APPHONAL	IF ANY:		****						
		,							
DEC. 22 197 / -	****	ons on Reverse Side							
But	Jee Instructio	NIS UN NEVERSE JIGE							
ANTING DISTRICT STRUMESR	ξ			, <u>.</u>					
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