Form 9-331 (May 1963)	-UNITED S	STATES	SUBMIT IN T 'LICAT	Form approved.
	DEPART _NT OF	THE INTERIO	R (Other instru s on verse side)	5. LEASE DESIGNATION AND SERIAL NO.
	GEOLOGICA		<u> </u>	LC 029395 (b)  6. IP INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS				- I Y # A K Q
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  Use "APPLICATION FOR PERMIT—" for such proposals.)				i no silique on signatura de la directa de la constanta de
OIL X GAS OTHER				7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR				8. FARM OR LEASE NAME
SINCLARR OIL	CORPORATION			Figurner "B"
P. C. Box 1920, Hobbs, New Mexico 88240				9, WELL NO.
LOCATION OF WELL (Repo	ort location clearly and in a	•	tate requirements.*	10. PIELD AND POOL, OR WILDCAT
See also space 17 below.) At surface 565' fr the North line and 586' fr the West line				គ្គីទី <b>Fren</b> ាំទី
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
				៊ី 29-T17S-R31E
14. PERMIT NO. 15. ELEVATION		NS (Show whether DF, R	T, GR, etc.)	12. COUNTY OR PARISH 13. STATE
		3623.	88' DF	New Mexic
16.	Check Appropriate Bo	x To Indicate Na	ture of Notice, Report, o	r Other Data
NOT	TICE OF INTENTION TO:	1	SUBS	EQUENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER	CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMP	T.ETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE  REPAIR WELL	ABANDON* CHANGE PLANS		SHOOTING OR ACIDIZING (Other)	ABANDONMENT*
(Other) Shut W	√ell In	x	(Note: Report resu	ults of multiple completion on Well mpletion Report and Log form.)
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D.S.	EC 1 6 1983			is desirated for addition of the middle of the provided of the
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ARTI	C 1 6 1983  J. C. C.  ESIA. OFFICE  foregoing is true and corre	ect		the lates of the stand of the s
3. I hereby certify that the  BIGNED  (This space for Federal of APPROVED BY	C 1 6 1983  J. C. C.  EBIA. OFFICE  foregoing is true and correction  or State office use)	ect		The petton tooking to approved of a six and thought of parting of the condition of the cond
S. I hereby certify that the  SIGNED  (This space for Federal of APPROVED BY CONDITIONS OF APPRO	OVAL, IF ANY: Artesia, N.M. hern Region, (Western	TITLE	Superintendent	middlendus to herrisch ei mid i i i i i i i i i i i i i i i i i
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