Form 3160-5 (November 1983) (Formerly 9-331)	DEPARTM	ITED STATES T OF THE INTER F LAND MANAGEMEN	SUBMIT IN TRIE (Other Instruct) (Other Instruct) (OR verse side) (ORS. COMMISSIO	on re	Expires Au	B
SUN (Do not use this	DRY NOTICES	S AND REPORTS o drill or to deepen or plug o FOR PERMIT—" for such	DD DNNWESS250 back to a different reserve proposals.)	1	. IF INDIAN, ALLO	TTEE OR TEIBE NAME
1.	· · · · · · · · · · · · · · · · · · ·			7	. UNIT AGREEMEN	TNAME
OIL CAS WELL WELL	OTHER	· · · · · · · · · · · · · · · · · · ·	RECEIVED BY	 _	. FARM OR LEASE	NAMP
2. NAME OF OPERATOR	\checkmark		MAD - 1007	l °	Dunn B Fe	
DEPCO, Inc. 3. ADDRESS OF OPERATOR			MAR <u>5</u> 1987	9	. WELL NO.	0'1
		as 79761	0 C D.		28	
4. LOCATION OF WELL (F See also space 17 bel	leport location clearly	as 79761 and in accordance with an	y State requirements.*	1	0. FIELD AND POO	
At surface		12, T-185, R-28	E - Court in Structure of a subsection of the su		Artesia 1. sec., t., B., M., BUEVEY OF	
					0 10	10 00
14. PERMIT NO.	15	ELEVATIONS (Show whether I	DF. RT. GR. etc.)		Sec 12, 2. COUNTY OB PAN	
14. I BRAIL 10,		3615 GR '			Eddy	New Mexico
16.	Charle A sprov		Nature of Notice Rep	ort or Oth	er Data	
					E BPORT OF :	
TEST WATER SHUT-O Fracture treat		OR ALTER CASING	WATER SHUT-OFF FRACTURE TREATM	ENT		G CASING
SHOOT OR ACIDIZE	ABAND		SHOOTING OR ACID		ABANDON	[
REPAIR WELL	CHANG	GE PLANS	(Other)			
(Other)			(Norr: Repo Completion o	ort results of or Recompletio	multiple complet n Report and Log	ion on Well 3 form.)
Set a CI Perf @ 8 Set 10 s	BP @ 2175' w/ 00' & saz w/2	ng this well as f '35' cmt on top. 200 sxs cmt leavi s w/dry hole mark 1 plugs.	ng 75' in pipe.	ion.		
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				1 - 13 1 - Ma		
				4	MAR 02	1007 (2)
						1987 -
				•	0157 A .	
					in a a	· · ·
					Ser New	
					The second of the second	and the second se
18. I hereby certify that	the foregoing is true	and correct				
SIGNED	nney R. L.	Denney TITLE	Chief Production	n Clerk	DATE	2-27-87
	ral or State office use gd. Charles S. Del	lion	· · · · · · · · · · · · · · · · · · ·			3-487
APPROVED BY CONDITIONS OF AP	PROVAE IF ANY	TITLE			DATE	- /

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*See Instructions on Reverse Side