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Form 9-331 (May 1963)	U. ED STATES SUBMIT IN TRIL JATES DEPARTMENT OF THE INTERIOR verse side)						re-					
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	SUNDRY N	OTICES AND		ON WEI	15					EE OR	TRIBE NAME	-
	e this form for m	roposals to drill or t LICATION FOR PER	o deepen or plug	back to a diff		eservoir.				2		
1.			<del></del>	REC	E	VED	7	UNIT AG	REBMENT :	NAME	74 E E	-
WELL W	AS OTHE	CR		- NAV		107E	_				3234	_
2. NAME OF OPERA		FAIR, INC.		NUV	4	19/5	- 1		n Fede			
3. ADDRESS OF OP	<del></del>	AIN, INC.			C (	<u> </u>		WELL N			POLE	-
P. O. Bo			New Mexico		A. OF	FICE		#5	AND POOL,	OR WI	SEES	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface								Loco	Hills. urg. S	Qüe	en 🗐 🗧	
330' FNL & 1980' FWL								1. SEC., 7	C., R., M., OF VEY OR AR	BLK.		_
						•		Sec.	4 - T1	કુટ 8s≒-	R306	
14. PERMIT NO.		15. ELEVATION	S (Show whether	DF, RT. GR, etc.)			$ _{1}$	2. COUNT	Y OB PARIS			
		3571.4	4 GR	<del></del>				Eddy			NM =	-
16.	Check	: Appropriate Bo	x To Indicate	Nature of N	Votice	, Report, c	or Oth	er Data		bed	1 2 2 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
	NOTICE OF I	NTENTION TO:				SUB	SEQUEN	r report		i i i i i i i i i i i i i i i i i i i	######################################	
TEST WATER	SHUT-OFF X	PULL OR ALTER			er shu				REPAIRING	ڼ	2 - 3 -	
FRACTURE TRE SHOOT OR ACL		MULTIPLE COMP	LETE	1		REATMENT OR ACIDIZING		-842-4 -9423-3	ABANDON	~~		
REPAIR WELL		CHANGE PLANS		(Oti	ner)	: Report res	ulta of	<del></del>	iompletie	<u> </u>		
(Other)	ASER AS COMPLETE	D OPERATIONS (Clear	le state all partin	ent details as	Comp	letion or Rec	ompleti	n Repor	tand Log	form.)	<del></del>	i n ⇔
proposed we nent to this	ork. If well is di	irectionally drilled, g	ive subsurface lo	cations and m	easured	and true ve	rtical d	epths for	Tall mark	ers an	d zoges per	ii) S
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On Octob	er <b>25, 19</b> 7	5, 8 5/811 24	# casing w	as set a	t 518	8' with	150	sacks	in a significant	ı.ğı		3
cement 2	% Ca Cl.	The <mark>c</mark> asing w	as pressur	e tested	to !	500 PSI	and	held.	Afte	r 🚆	1 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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18. I hereby cert	ify hat the forego	old is true and cor	rect	<del></del>	<del></del>							
SIGNED	hout	M Smill	TITLE	Geol	ogis	t		. <b>DA</b> '	TE = 10-	28-7	75 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
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