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re-	Form approved, Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.							
	NM 42410							
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME							
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	The state of the s							
	7. UNIT AGREEMENT NAME							
	8. FARM OR LEASE NAME							
	Crossfire Federal							
	9. WELL NO.							
	1							
	10. FIELD AND POOL, OR WILDCAT							
	Artesia Oil Pool							
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA							
	30 3 0.21 00 202 1							
	Sec. 12-T18S-R27E							
	12. COUNTY OR PARISH 13. STATE							
	Eddy NM							
or U	ther Data							
SEQU:	ENT REPORT OF;							
	REPAIRING WELL							
	ALTERING CASING							
	ABANDONMENT*							
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ults	of multiple completion on Well ction Report and Log form.)							
tes.	including estimated date of starting any							
rtical	depths for all markers and zones perti-							
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Form 9-331 (May 1963)		:D STAЂĘ§ _{we}	r DD su	BMIT IN TRIIC her instructions o	ATE*	Form approve Budget Bures	ed. 1u No. 42–R1424.	
	DEPARIMENT OF THE THE TEST (WK v68200)					5. LEASE DESIGNATION AND SERIAL NO.		
	GEOLOG	SICAL SURVE	<u>Y</u>			NM 42410 6. IF INDIAN, ALLOTTE	OD TRIBE NAME	
SUN (Do not use this	DRY NOTICES A form for proposals to dri Use "APPLICATION FO	ND REPOR	IS ON WI	ELLS		o. If INDIAN, ADDITED	, OR TRIBE NAME	
1.			RECEIV			7. UNIT AGREEMENT NA	ME	
WELL XX WELL	OTHER		SEP 1	1 1985				
2. NAME OF OPERATOR	DD 777 7310 7310		OLI -			8. FARM OR LEASE NAM		
FRED POOL		. V	0. 0			Crossfire I	<u> Pederal</u>	
P.O.Box 1393 Roswell, N.N			ARTESIA, OFFICE			3. WELLE NO.		
	eport location clearly and	in accordance with	any State requ	irements.*		10. FIELD AND POOL, O	WILDCAT FOOL	
1809 FNL	990 FEL					11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA		
Unit H	SEZ NEZ					C 10 m16	oc noar	
14. PERMIT NO.	15. ELE	VATIONS (Show wheth	her DF, RT, GR, et	c.)		Sec. 12-T18		
		3604 GL				Eddy	NM	
16.	Check Appropriat		ite Nature of	Notice Report	or Ot		<u>, </u>	
;	NOTICE OF INTENTION TO:	o Dox 10 maid	!			UENT REPORT OF:		
TEST WATER SHUT-O	<u> </u>	LTER CASING	w	ATER SHUT-OFF		REPAIRING V	WELL T	
FRACTURE TREAT	MULTIPLE	1	 	ACTURE TREATMENT		ALTERING CA	<u> </u>	
SHOOT OR ACIDIZE	ABANDON*		se	OOTING OR ACIDIZING	3	ABANDONMEN	VT*	
REPAIR WELL (Other)	CHANGE PI	LANS	(0	(Nore: Report r	esults o	f multiple completion	on Well	
nent to this work.)	5-85: Ran tu Pulled	ibing to l I tubing o	612 ft.	; swabbed	hole	e dry.	and zones perti-	
	the foregoing is true and	0	Cle:	r 1r		DATE9-6	-85	
(This space for Fode	rel on State office and	TITLE .				DATE		
4	ral or State office use)	de de de de						
APPROVED BY A	CCPTED FOR REI	CORO TITLE			.	DATE		

SEP 10 1985

*See Instructions on Reverse Side