Form 3160-5 (July 1989) (Formerly 9-331)	UNITED STATES DEPARTMENT OF THE INTER BUREAU OF LAND MANAGEMEN	ONIACT RECEIVING OFFICE FOR NUMBER OF OOPIES REQUIRED (Other Instructions on re-	BIM Roswell District Modified Form No. NO60-3160-4 5. LEASE DESIGNATION AND SERIAL NO.
SUN (Do not use this	DRY NOTICES AND REPORTS form for proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such	O11 1450	LC-029415 B 6. IF INDIAN, ALLOTTEE OR TEIBE NAME
OIL CAB WELL 2. NAME OF OPERATOR	П отнев		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR		3a. Area Code & Phone No. 505-676-2266	8. FARM OR LEASE NAME PUCKETT B
P.O. BOX 9,	Maljamar, NM 88264-000 eport location clearly and in accordance with an	9	9. WALL NO. 34
are marrace	nd 20' FNL of Section 25	y State requirements.	10. FIELD AND POOL, OR WILDCAT Malj. G-SA 11. BEC., T., E., M., OR BLE. AND SURVEY OR AREA
14. FERMIT NO.	16. ELEVATIONS (Show whether D	F, RT, GR, etc.)	Sec. 25, T17S, R31E
6.	Check Appropriate Box To Indicate Portice of Intention To:	Nature of Notice, Report, or O	Eddy NM ther Data
TEST WATER SHUT-OF PRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	#77-79	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING	BEPAIRING WELL ALTERING CASING ABANDONMENT*
7. DERCRIBE PROPURED OR proposed work. If nent to this work.)	OMPLETED OPERATIONS (Clearly state all pertinen well is directionally drilled, give subsurface local	t details, and give pertinent dates, I	of multiple completion on Well tion Report and Log form.) neluding estimated date of starting any depths for all markers and some parti
On October 2 with 700 sx.	premium plus with 2% Ca	OD 44# J-55 casing CL. Cement circul	g at 615' lated to surface.

•	ith 6# salt. RECEIVED)
	APR 0 1 1998	₹18 27
	OIL CON. DIV	The state of the s
IN. I hereby certify that the foregoing is true and correct	ACCEPTED FOR RESERVED CARLSBAD,	96. HF 45.91
SIGNED Bornel (This space for Pederal or State office use)	TITLE Prod. Supt.	11/2/95
APPROVED BY	TITLED	ATE

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