| Form 9-331 (May 1963) | UNITED ST DEPARTMENT OF T GEOLOGICAL | THE INTERIO | SUBMIT IN TRIPLICAT (Other Instructions on PR verse side) | Form approved. Budget Bureau No. 42-R14: 5. LEASE DESIGNATION AND SERIAL NO. XX4-014102 |
|--|--|------------------|---|--|
| SUNDRY NOTICES AND REPORTS ON WELLS (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.) | | | | 6, IF INDIAN, ALLOTTEE OR TRIBE NAM |
| OIL GAS WELL OTHER | | | | 7. UNIT AGREEMENT NAME |
| J.J. Travia | | | | 8. FARM OR LEASE NAME LICCIOTION |
| 3. ADDRESS OF OPERATOR P.O. DOM 873, Midland, Teller 70701 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, CR, etc.) | | | | 9. WELL NO. |
| | | | | 10. FIELD AND POOL, OR WILDCAT 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA |
| | | | | 20, 180, 3,0, 1000 12. COUNTY OR PARISH 13. STATE |
| | | | | Hedy H.L. |
| 16. | Check Appropriate Box | c To Indicate No | ature of Notice, Report, o | or Other Data |
| N | OTICE OF INTENTION TO: | | SUB | SEQUENT REPORT OF: |
| TEST WATER SHUT-OF | MULTIPLE COMPL | | WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING | REPAIRING WELL ALTERING CASING ABANDONMENT* |
| SHOOT OR ACIDIZE REPAIR WELL | ABANDON* CHANGE PLANS | | (Other) | |
| (Other) | | | Completion or Reco | ults of multiple completion on Well ompletion Report and Log form.) ites, including estimated date of starting |
| | OCT 2 | | | |
| 18. I hereby certify that SIGNED | the foregoing is true and corre | | Proposit | DATE COST. CO. |
| (This space for Feder | ral or State office use) | | | |
| | | TITLE | | |
| (This space for Federal APPROVED BY CONDITIONS OF AFECORIE FOR RECORD 1969 | PROVAL JESANY: PURPOSE Engineer | | · · · · · · · · · · · · · · · · · · · | DATE |