	<u>N.M.O.</u>	C.D. COPY		CISF
Porm 9-331 (May 1963) UNI D STATES SUBMIT IN TRIPLIC DEPARTMENT OF THE INTERIOR verse side) GEOLOGICAL SURVEY				n approved. get Bureau No. 42-R1424. GNATION AND BERIAL NO.
		LC	069041	
(Do not use this form for Dropos	CES AND REPORTS ( als to drill or to deepen or plug TION FOR PERMIT—" for such p	back to a different reservoir.	6. IF INDIAN,	ALLOTTEE OR TRIBE NAME
1. OIL GAS OTHER	Re-entry	· · · · · · · · · · · · · · · · · · ·	7. UNIT AGRE	IMENT NAME
2. NAME OF OPERATOR			8. FARM OR LEASE NAME	
C. E. LaRue and B. N. Muncy, Jr. V 3. ADDRESS OF OPERATOR			Carper-Sanford 9. WELL NO.	
<ul> <li>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface</li> <li>660' FNL &amp; 990' FEL, Section 4, T19S, R31E</li> </ul>			10. FIELD AND POOL, OR WILDCAT	
			Shugart	
			11. SHC., T., R., M., OR BLK. AND BURYEY OF ARBA Sec 4, T19S, R31E	
	3610' DF			
16. Check Ap	propriate Box To Indicate N	Nature of Notice, Report, or O	ther Data	
NOTICE OF INTENTION TO:			ENT REPORT OF	:
TEST WATEL SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	RE	PAIRING WBLL
	CULTIPLE COMPLETE	FRACTURE TREATMENT	. AL	TERING CASING
	ABANDON®	SHOOTING OR ACIDIZING		ANDONMENT*
	HANGE PLANS	(Other) PIL	igging	X_
(Other)		(NOTE: Report results Completion or Recomple	of multiple con tion Report an	npietion on Well d Log form.)
WOC 12 hrs, tag cmt p WOC 6 hrs & tag plug	olug @ 3116', ran tb @ 613'. Pumped 10	mud and pumped 55 sx o g to 900' and pumped 3 sx omt plug @ surface eaned up location 1/8/	35 sx cmt 1/7/78.	plug,
				RECEIVED
RECEIVE			C	JUN 13 19 <b>80</b>
		JUN 6 1979		O. C. D. ARTESIA, OFFICE
			1	2 tod 10-2
		U.S. GEULUGIDAL	<u>-1</u>	Post PAT
		ARTESIA, NE	. J	Posted 10-2 Posted 10-2 ported 10-2 ported 10-2 ported 10-2
18. I hereby certify that the foregoing is	0-			£ / 5 / 70
SIGNED _	TITLE	<u>Operator</u>	DATE .	6/5/79
(This space for Federal or State offic	te use)			<u></u>
APPROVED BY DEORGE H	STEWART TITLE	THERE AND ANGENTER	DATE .	MIN 1 2 1980
CONDITIONS OF APPROVAL, IF A	M1:			

\*See Instructions on Reverse Side