		UNITED STATES SUBMIT IN TRIE MENT OF THE INTERIOR Verse side) GEOLOGICAL SURVEY					
(	SUNDRY NOT Do not use this form for propos Use "APPLICA	CES AND REPORT als to drill or to deepen or pl TION FOR PERMIT—" for su	S ON WELLS lug back to a untrent reservoir. sch proposals.)	6. IF INDIAN, ALLOTTEE	OR TRIBE NAME		
1. OIL WELL	GAS OTHER	Water Injection	MAR 1 8 1980	7. UNIT AGREEMENT NA	ME		
	OF OPERATOR	any	O. C. D.	8. FARM OR LEASE NAM	E		
	ESS OF OPERATOR	cury	ARTESIA, OFFICE	9. WELL NO.			
•••	0 Wall Towers West,	Midland, Texas	79701	3			
See a	TION OF WELL (Report location c ilso space 17 below.) urface	learly and in accordance with	any State requirements.*	10. FIELD AND POOL, OI Shugart (Y, S			
0000	t Letter F O' FNL, 1650' FWL,	11. SEC., T., R., M., OR BLK. AND SUBVEY OR AREA					
	•	Sec. 29, T-18	-S, R-31-E				
14. PERM	HIT NO.	15. ELEVATIONS (Show wheth	er DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE			
		Unknor	wn	Eddy	N.M.		
16.	Check Ap	Other Data					
NOTICE OF INTENTION TO:			SUBSEQ	SUBSEQUENT REPORT OF:			
TES	T WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING V	VELI.		
FRA	CTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING C.	SING		
SHO	DOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONME	T*		
REP	AIR WELL	CHANGE PLANS	(Other) Cancel Fo	orm 9-331	X		
(0)	(Other) (Note: Repor			of multiple completion letion Report and Log for	on Well m.)		
pi	RIBE PROPOSED OR COMPLETED OFF roposed work. If well is direction ent to this work.) *	RATIONS (Clearly state all per onally drilled, give subsurface	tinent details, and give pertinent dates, locations and measured and true vertic	including estimated dat al depths for all markers	e of starting any ; and zones perti-		

This is notice to cancel approved Form 9-331 issued on January 30, 1978 to repair well. This work was never done.

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18. I hereby certify that the foregoing is true and correct SIGNED	TITLE District Enginee	er	DATE	2-27-80
(This space for Federal or State office use)				
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE		DATE	