## NMOCC COPY

Form 9-331 (May 1963)

## UNITED STATES DEPARTMENT OF THE INTERIOR SUBMIT IN TRIPLICATE\* (Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

N. Mex.

GEOLOGICAL SURVEY LC-029392B 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 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.) 7. UNIT AGREEMENT NAME GAS WELL WELL X RECEIVED OTHER S. WARM OR LEASE NAME 2. NAME OF OPERATOR Federal 26 Visa Exploration Corporation MAR 12 1979 9. WELL NO. ADDRESS OF OPERATOR 1610 North J. Midland, Tx 79701

LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.)

At surface 10. FIELD AND POOL, OR WILDCAT ARTESIA, OFFICE Shugart 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 330° FSL & 1980° FEL Sec.26, T18S, R31E 12. COUNTY OR PARISH | 13. STATE 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

16.	Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data						
	NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:			
						7	
	TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF REPAIRING WELL	-	
	FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT ALTERING CASING	-	
	SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING ABANDONMENT*		
	REPAIR WELL		CHANGE PLANS		(Other) Casing Leak Survey X		
	(Other)			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

3663' DF

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Checked, tested and approved by James Brasfield on Feb. 12, 1979.

RECEIVED

MAR 9 1979

MAR 9 1979

WARENA, NEW MENON

ARTENA, NEW MENON

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18. I hereby certify that the foregoing is true and correct	et	<u> </u>
SIGNED Meal a Taylor	TITLE Agent	DATE 3/7/79
(This space for Federal or State office user)	TITLE ACTING DISTRICT ENGINEER	DATE MAR 9 - 1979
CONDITIONS OF APPROVAL, IF ANY:	TITLE ACTUAL	