

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIP
OTHER INSTRUCTIONS
VERSE SIDE

30-015-21816
Form approved.
Budget Bureau No. 42-R1424.
LEASE DESIGNATION AND SERIAL NO.
NM 1372
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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR	9. WELL NO.
4. 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
1980' FSL & 1980' FEL	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
14. PERMIT NO.	12. COUNTY OR PARISH
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	13. STATE
3510.6 GR	Eddy NM

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OCT 20 1976

O.C.C.
ARTESIA, OFFICE

Dagger Draw

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	PULL OR ALTER CASING
FRACTURE TREAT	MULTIPLE COMPLETE
SHOOT OR ACIDIZE	ABANDON*
REPAIR WELL	CHANGE PLANS
(Other) Extension of Approval	X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREATMENT	ALTERING CASING
SHOOTING OR ACIDIZING	ABANDONMENT*
(Other)	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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. *

Please reinstate our Application for Permit to Drill (Form 9-331C) dated May 19, 1976.

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U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

18. I hereby certify that the foregoing is true and correct.

SIGNED Roger C. Hanks TITLE Owner-Operator DATE 10-18-76

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE Owner-Operator DATE 10-18-76

CONDITIONS OF APPROVAL, IF ANY:

THIS APPROVAL IS VALID FOR 12 MONTHS.
JAN 1 8 1977
*See Instructions on Reverse Side