Form 9-331 (May 1963)	UFITED STATES DEPARTMLL OF THE IN GEOLOGICAL SURV		Form approved. Budget Bureau No. 42-B142 5. LEASE DESIGNATION AND SERIAL NO.
(Do not use	UNDRY NOTICES AND REPO	NM OO1119 6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
O(L GAS WE'LL WE'L	- 01.30 III NC.1		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPER.	Jou. D. Riggs .		8. FARM OR LEASE NAME
E. LOCATION OF WELL See also space 17 At surface	Lox 11c, Carlsbad, N. (Report location clearly and in accordance with below.) Sec. 5 T215; 1.278 1050 feet from a	3822C ith any State requirements.*	9. WELL NO. 1 10. FIELD AND POOL, OR WILDCAT Ceder Hills 11. SEC., T., R., M., OR BLK, AND SURVEY OR AREA
4. PERMIT NO.	15. ELEVATIONS (Show whe	ether DF, RT, GR, etc.)	5, 21-27 NP.W. 12. COUNTY OR PARISH 13. STATE
6.	Check Appropriate Box To Indic	ate Nature of Notice, Report, or Otl	- ₹ddy
mn	To Tarkation to:	1	NT REPORT OF:
TEST WATER SHUFFRAT TURE TREAT SHOOT OR ACIDIZE GEPAIR WELL	MULTIPLE COMPLETE	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING	REPAIRING WELL ALTERING CASING ABANDONMENT*

(Other) return to production X (Note: Report results of multiple completion on Well

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any nent to this work.)*

(Other) _

run tubing, rods and pump and make production test this week

Sept. 22,27 1975

RECEIVED

SEP 23 1975

SEP 23 1975

SEP 23 1975

		U.S. GEOLOGIUM MEN.
		v
. I hereby certify that the foregoing is true and co		
(This space for Federal or State office use)	TITLE Cremator	DATE _09-21-75
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	_ TITLE	DATE
1. Broken	_	
El Proposition	*See Instructions on Reverse Side	