Form 9-331

UNITED STATES

SUBMIT IN TRIPLICATE.

Form approved.

| (May 1963) | | MENT OF THE | | R (Other Instructions verse side) | on re- | LEASE DESIGNATION | U NO. 42-K1424. AND SERIAL NO. | |
|--|----------------------|-------------------------|--------------------|---|------------------------------|---|-----------------------------------|--|
| | c | SEOLOGICAL S | URVEY | apy | 11/11 | NM 033647-B | | |
| CLIN | IDDY NOT | ICES AND RE | AO STRORE | J WELLS | A. 6. | IF INDIAN, ALLOTTEE | OR TRIBE NAME | |
| | | | | to a different reservoir. | | | | |
| | Use "APPLICA | TION FOR PERMIT- | —" for such propo | osals.) | | UNIT AGREEMENT NA | V T | |
| OIL Y GAS | \Box | | | | " | UNII AVADEMENI NA | | |
| WELL A WELL OTHER 2. NAME OF OPERATOR | | | | | | 8. FARM OR LEASE NAME | | |
| Socony Mobil Oil Company, Inc. Agent for Chevron Oil Company | | | | | | Bogle Flats Unit | | |
| 3. ADDRESS OF OPERATOR | | | | | | 9. WELL NO. | | |
| Box 1800, Ho | bbs. New M | exico | | | | 9 | | |
| 4. LOCATION OF WELL (| Report location c | | nce with any Sta | ite requirements.* | 10 | . FIELD AND POOL, OR | WILDCAT | |
| See also space 17 be At surface | 10W.) | | | 9 CD 1 | des In | dian Basin U | pper Penn. | |
| 1650' from E | ast Line, | 2035' from N | orth Line, | Sec. 17, T-22- | -S, 11 | SURVEY OR AREA | LK, AND | |
| Eddy County, | New Mexic | О | | | | | = - | |
| | | | | | | ec. 17, 22-S | | |
| 14. PERMIT NO. | | 15. ELEVATIONS (Sh | ow whether DF, RT | , GR, etc.) | 12 | . COUNTI OR PARISH | 10. STATE | |
| | | | | | | | <u> </u> | |
| 16. | Check As | propriate Box To | Indicate Nat | ure of Notice, Report | t, or Othe | er Data | | |
| | NOTICE OF INTEN | TION TO: | 1 | | SUBSEQUENT | REPORT OF: | | |
| | | PULL OR ALTER CASIN | | WATER SHUT-OFF | | REPAIRING W | WHILE | |
| TEST WATER SHUT- | · · · | MULTIPLE COMPLETE | | FRACTURE TREATMENT | r | ALTERING CA | | |
| SHOOT OR ACIDIZE | | ABANDON* | | SHOOTING OR ACIDIZI | | ABANDONMEN | | |
| REPAIR WELL | | CHANGE PLANS | | | | & Casing Tes | t | |
| (Other) | | | | (Note: Report Completion or I | results of a Recompletion | multiple completion (n Report and Log for | on Well | |
| proposed work. I nent to this work. | if well is direction | onally drilled, give su | ubsurface location | etails, and give pertinents and measured and true | vertical de | pths for all markers | and sones perti | |
| | | rations 11:5 | | | ٠. | | | |
| | | | | ed w/550 sax co | | | 11 20 4 3 | |
| | | | | x regular neat ment @ 136'. Red | | | | |
| | | | | , Recemented w | | | | |
| | | | | | | | | |
| Tagged cement 4 100'. Recemented w/150 sx. Incor neat, cement 9:00 P.M. 2-24-66. WOC 22 hours. | | | | | | | = : : | |
| | | | | | | | 의 기계 시간 - 및 위 상기 | |
| Tested $w/100$ | 0# 30 min. | OK | | | | | | |
| | | | | | | | | |
| | | | RECE | IVED | | CENTED 1966 GEOLG CALSU TESIA, NEW MEX | 11 E. | |
| | | | | | . 4 | CIV | | |
| | | | MAAD 2 | 1966 | OE | 066 | | |
| | | | MAR 3 | 1300 | L. | 1900 | RVEY | |
| | | | 6 7) | -) - ;================================= | N | IM PERCUT SO | rico. | |
| | | | | , DFFICE | c | GEOLUMEN ME | | |
| | | | | | 1. 2. | TESTA. | | |
| | | | | | Αn | | • | |
| | | | | | | | | |
| 18. I hereby certify the | t the foregoing i | s true and correct | | | | | | |
| SIGNED | 1 Ken | 200 | TITLE Gro | oup Supervisor | | DATE 2-28- | 66 | |
| | 7 \ | | | | | | | |
| This spede tol Fee | leral or State off | ice use) | | | | • | | |
| DAPPROVED BE | | | TITLE | | | DATE | <u> </u> | |
| CONDITIONS | ÉPPROVAL, IF | ANY: | | | | | | |
| A 95 A 1/1/1 | | | | | | | | |

*See Instructions on Reverse Side