## N. M. O. C. C. COPT

Capy to 5 7.

Form 9-331 (May 1963)		JNITED STA MENT OF TH		SUBMIT IN A		Bue		No. 42-R1424 No. 5ERIAL NO.
		SEOLOGICAL S		UR verse side)		NMO	_	ND SERIAL NO.
	SUNDRY NOT this form for propos Use "APPLICA				ervoir.			OR TRIBE NAME
1. OIL GA	e 57		·			7. UNIT AGRI	1	
	ELL C OTHER					North C 8. farm or		uls unt
3. ADDRESS OF OPERATOR						9. WELL NO.		
4. LOCATION OF WE See also space 1 At surface	600 mullo LL (Report location cl 7 below.)	early and in accord	79701	State requirements.*		10. FIELD AT		WILDCAT
3060 F	NL, 1993	FEL, of Se.	c. 5, T-7	11-5, R-2°	7-E,	11. SEC., T.,		K. AND
Eddy county, New Mexico							ラフィーく	R-27-F
14. PERMIT NO.	<u> </u>	15. ELEVATIONS (S	how whether DF,	RT, GR, etc.)		12. COUNTY	OR PARISH	
		later	<u> </u>			Eddy		New May
16.	Check Ap	propriate Box To	o Indicate N	ature of Notice, I	Report, or O	ther Data		
	NOTICE OF INTEN	TION TO:	r		SUBSEQUI	NT REPORT O	)F:	,
TEST WATER SI	<del></del>	PULL OR ALTER CASIS	4g	WATER SHUT-C			EPAIRING W	
FRACTURE TREA		AULTIPLE COMPLETE		FRACTURE TRE			LTERING CAS BANDONMENT	
REPAIR WELL		CHANGE PLANS		(Other)	Report results	of multiple co	ompletion o	n Well
(Other) 17. DESCRIBE PROPOS	SED OR COMPLETED OPE	RATIONS (Clearly sta	ite all pertinent	Completed details, and give per	on or Recomple	tion Report a ncluding esti	ind Log forn	n.) of starting any
proposed wor nent to this w	k. If well is direction ork.)*	nally drilled, give s	ubsurface locat	ions and measured a	nd true vertical	depths for t	lli markers	and zones perti-
Spudd	led 171/2"	hale at	3:00Am	5-20-66	Ran 6		18 gt	<b>a</b> )
13 3/8"	cosing, 48	#, H-49,	set at	602'. Ce	mented	with	1550	تعهم
270 9	Sel with	cal. Chlo	. follo	ned by 10	O ster or	reax c	ement	-
Coment	ciculatel	. 808 9:0	00 PM	5-21-66.	woc 36	house	. Teste	d
								l Annue :
20-010	900# Jours	me gar.	3 0 01100100	one o mo an	<b>~</b> ~ ~ ~	essine.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
						_		)
						RECE	100	
					£.	rici C	4.136 	
						MAY 3 S. CELLO S. OFFSHA	از کی کردن مور	edi Gundan
					Ú	S. CELL.	WE are man	
18. I hereby certify	that the foregoing is	true and correct		n ct				
SIGNED	.X. Clen	mer	TITLE	hgent		_ DATE	5-21	6 b
(This space for	Federal or State offi	ce use)						
APPROVED RY	APPROVAL, UF A	N.F.	TITLE			Ree	EIV	<b>R</b> F
OPAIN	1066							·
						200 4		

\*See Instructions on Reverse Side