STE COM COMMOSTONITED STATES	5. ASE EG-063516 5 5 0/8
DEPARTME. OF THE INTERIOR CONVENTED	5. ASE <u>LG-063516</u> OA
tosia, MM 88210 GEOLOGICAL SURVEY	IF INDIAN, ALLOTTEE OR TRIBE NAME
OWNERS AND PERCENT ON WELLS	7 UNIT AGREEMENT NAME
SUNDRY NOTICES AND REPORTS ON WELLS	Big Eddy Unit
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)	8 FARM OR LEASE NAME
李寶],唯中·福祉。 - 6、19、21代 年 4、1887 海 衛星。 12年1日 東京市場 中央機構機	Big Eddy
1. oil gas other well other	9. WELL NO.
2. NAME OF OPERATOR	103
Ammex Petroleum, Inc.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Wildcat - Bone Spring
Box 10507 Midland, TX 79702	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Sec. 10, T218, R28E
AT SURFACE: 660' FSL & 1980 FWL SE/4 SW/4 Un.N	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: same	Eddy - SNM - E
AT TOTAL DEPTH: same	14. API NO
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	10 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	3307' GRIT FILE A PART
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	출연하다 그 회회자형
FRACTURE TREAT USAGE SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE	그 그 그 그 그 가는 가는 사람들이 가득하다 되었습니다.
CHANGE ZONES	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
ABANDON* [] [] (other) Set intermediate casing	그 그 그는 그는 그를 하는 하는 그를 가는 일을 수 있다.
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertine 5/20/84 Drill 11" hole to 2702'. Run 70 jts	ent to this work.)* 9 5/8" J-55 36# casing
Set @ 2648'. Cmt 1st stage w/650 sx pace setter life & 150	
sx "C" + 2% CaCl. Open DV tool & br	
2nd stage w/150 sx "C" + 2% CaCl. Circ. 20 sx cmt. WOC 24 hrs. Test to 1000# OK Witnessed by Mr. Cope w/BLM	
	<u> </u>
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNED THE Operations C	Clerk DATE 5/29/84? = 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
ACCEPTED FOR RECORDING Space for Federal or State of	office use)
APPROVED BY STATE TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	
JUN A 1984	등이 월환의 첫화 무림표현
	
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NEW MEXICO	e siue