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Form 9-331 (May 1963) DEP	UNITED STATES ARTMENT OF THE INTER GEOLOGICAL SURVEY	SUBMIT IN TRIPLICATE* (Other instructions on re-	Form approved. Budget Bureau No. 42-R1424.  5. LEASE DESIGNATION AND SERIAL NO. NM 0100958		
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.)			6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
1.  OIL GAS X OTHER			7. UNIT AGREEMENT NAME		
2. NAME OF OPERATOR  MONSANTO COMPANY - PRODUCTION DEPT.				8. farm or lease name DARK CANYON	
3. ADDRESS OF OPERATOR  321 West Texas, Midland, Texas 79701			9. WELL NO.		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  660' FWL & 660' FNL				10. FIELD AND POOL, OR WILDCAT ROCK Tank - Morrow  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
14. PERMIT NO.	GL 3779; KB 3794	Sec. 18, T-23S, R-25E  12. COUNTY OF PARISH 13. STATE  Eddy New Mexi			
16. Che	ck Appropriate Box To Indicate 1	Nature of Notice, Report, or Oth	er Data		
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLE: proposed work. If well is nent to this work.)*  Drilled 8 3/4" ho  Set 5½" 17# N-80 Class "H", 3/4 of	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS  TED OPERATIONS (Clearly state all pertiner directionally drilled, give subsurface local depth of 10, & J-55 ST&C & LT&C Casin 1% CFR II & 8# Salt per ed w/ 1500# for 30 Mins.	water shut-off  FRACTURE TREATMENT shooting or acidizing  (Other)  (Note: Report results of Completion or Recompletion or Recompletion and details, and give pertinent dates, in tions and measured and true vertical of the state	ALTERI ABANDO  multiple comple on Report and Le cluding estimated lepths for all ma	g form.) I date of starting any rkers and zones perti-	
		RECEIVED			
		FEB 1 1975	REC	CEIVED	
		o. c. c.	JAN 3 1 1975		
·	ARTESIA, OFFICE		U.S. GEOLOGICAL SURVEY ARTESIA, NEW MEXICO		
18. I hereby certify that the fores	- / // A	istrict Production Mgr.	DATE	1/30/75	
(This space for Federal or So APPROVED BY APPROVED BY APPROVED BY	) \		DATE		

\*See Instructions on Reverse Side