·	RIOR (Other Instructions ( )	5. LEASE DESIGNATION AND MERIAL NO.  R-O-W NM 58368  6. IF INDIAN, ALLOTTEE OR TRIBE NAME				
The not use this form for	PLICATION FOR PERMIT—" for such	back to a different reservoir. proposals.)	O. H. HOLKN, ADDOLLED OR JEISE NAME			
	IER /	RECEIVED BY	7. UNIT AGREEMENT NAME  8. FARM OR LEASE NAME  Federal "AZ"  9. WELL NO.			
State Line, Lt	d.	APR 25 1986				
P. O. Box 39, LOCATION OF WELL (Report local See also space 17 below.) At surface	Hobbs, New Mexico 8822 tion clearly and in accordance with an		1 10. FIELD AND POOL, OR WILDFAT WE DISCOUSE L. Salt Water Disposal Well 11. SHC., T., B., M., OR BLK. AND BURYBY OR ARKA			
L PERMIT NO.	15. ELEVATIONS (Show whether i		Sec. 29, T26S R30E  12. COUNTY OR PARISH 13. STATE  Eddy N. M.			
Chec	k Appropriate Box To Indicate					
NOTICE OF	INTENTION TO:	BUBBEQUENT REPORT OF:				
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) See below Dass Rine Proposed or Complete proposed work. If well is neat to this work.)*	en openamore (Clearly state all pertina	Completion or Recomp	BEPAIRING WELL  ALTERING CASING ABANDONMENT®  Be of multiple completion on Welt obetion Report and Log form.)  A including estimated date of starting any cal depths for all markers and zones perti-			
	rom BBC, Inc. to State 5, 1986. State Order F		ter disposal well			

Post ID-3 5-2-86 Cng by mme

18. I hereby certify that the foregoing is true and correct						
	TITLE -	Vice	President,	BBC, Inc.	DATE	4-23-86
(This space for Federal or State office use)						
APPROVED BY	TITLE .				DATE	
CC: 4 to OCD - Artesia						

\*See Instructions on Reverse Side