N.M.O.C.D. COPY 30-015-231 Form 9-331 (May 1963) **UNITED STATES** Form approved. Budget Bureau No. 42-R1424. SUBMIT IN TRIPLICATE. DEPARTMENT OF THE INTERIOR (Other Instructions on verse side) 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY LC-02860 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 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.) 7. UNIT AGREEMENT NAME LX OTHER Poker Lake Unit NAME OF OPERATOR 8. FARM OR LEASE NAME Perry R. Bass Poker Lake Unit 3. ADDRESS OF OPERATOR 9. WELL NO P. O. Box 2760, Midland, Texas 49 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.

See also space 17 below.)

At surface 10. FIELD AND POOL, OR WILDCAT Wildcat 1980' FNL & 990 FWL, Sec. 17, T-24-S, R-30-E 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T24S. R30E 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH | 13. STATE 3247.6 GL Eddy NM 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING SHOOT OR ACIDIZE ABANDON\* SHOOTING OR ACIDIZING ABANDONMENT\* REPAIR WELL CHANGE PLANS (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) • Perry R. Bass submits revised caliche source for Poker Lake Unit #49. caliche source is located in the NW ¼ of NW ¼ of Sec. 17, T-24-S, R-30-E. Attached is map showing location of caliche source. 18. I hereby certify that the foregoing is true and correct

SIGNED

APPROVED BY

(This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY:

TITLE Drilling Engineer

DATE