| (Formerly 9-331) DEPARTM  |   | SUBMIT IN TRIPL<br>(Other instruction)<br>IOR verse alde)   | Te- Expires August 3<br>5. LEASE DESIGNATION AN   | 1 1005 .191                        |
|---|---|---|---|------------------------------------|
| SUNDRY NOTIC<br>(Do not use this form for proposal<br>Use "APPLICATI  | OF LAND MANAGEMEN<br>ES AND REPORTS<br>a to drill or to deepen or plug<br>ION FOR PERMIT—" for such p | ON WELLS  | 6. IF INDIAN, ALLOTTEE  | DR TRIBE NAME                      |
| 1.<br>OIL CAS<br>WELL CAS<br>WELL OTHER   | API_No. 30-015  |   | 7. UNIT AGREEMENT NAME  | £                                  |
| 2. NAME OF OPERATOR<br>Sun Exploration & Production JUL 28'88<br>3. ADDRESS OF OPERATOR   |   |   | 8. FARM OR LEASE NAME<br>Mobil "22" Federal   |                                    |
| P. O. Box 1861, Midland<br>4. LOCATION OF WELL (Report location clear<br>See also space 17 below.)  | , Texas 79705<br>rly and in accordance with any   | O. C. D.<br>State regariester OFFICE  | 9. WELL NO.<br>1<br>10. FIELD AND POOL, OR 1  |                                    |
| P, 330' FSL & 330' FEL  |   |   | Brushy Draw-D<br>11. BBC, T., B., M., OB BLE<br>SUBVET OF AREA                          | elaware                            |
| 4. PERMIT NO.   | 15. ELEVATIONS (Show whether DF<br>2889.4 GR  |   | 22, T-26-S, R<br>12. COUNTY OR PARISE   | 13. STATE                          |
| 6. Check Appr   | opriate Box To Indicate N   | · · · · · · · · · · · · · · · · · · ·   | Eddy  | NM                                 |
| NOTICE OF INTENTIO  |   | 1   | BEQUENT REPORT OF :   |                                    |
| FRACTURE TREAT MUI<br>SHOOT OB ACIDIZE ABA  | L OR ALTER CASING   | WATER SHUT-OFF<br>FRACTURE TREATMENT<br>SHOOTING OR ACIDIZING<br>(Other) Installa<br>(Note: Report re-<br>Completion or Rec | sults of multiple completion on   | NG XX                              |
| Gulf Federal No. 1, M,<br>to transfer produced wa<br>The Volume to be transp<br>as the Bedena Federal S<br>to bring this well back<br>and Utilities System ar<br>with Mr. Adrian Garcia | oorted is approxima<br>WD Well No. 1 stop<br>to Disposal. For<br>d Facilities on Fe                   | en go into the Wil<br>tely 900 BWPD. Th<br>taking water. Ati<br>m No. 299 (Applicat<br>deral Land) bas bos                  | liamson's Disposal<br>is temporary line w<br>temps are now being<br>tion for transporat | System.<br>as layed<br>made<br>ion |
| ·<br>·<br>·<br>·  |   | BOBA  |   |                                    |
| 8. I hereby certify that the foregoing is true  | ie and correct  |   |   |                                    |
| SIGNED Maria Z. P.  | TITLE   | Accounting Associa  | DATE  | 38                                 |
| (This space for Federal or State office u<br>APPROVED BY  |   |   |   |                                    |
| CONDITIONS OF APPROVAL, IF ANY  | TITLE<br>:  | ······································  |   | <b>W</b> . 19                      |
| itle 18 U.S.C. Section 1001, makes it   |   | on Reverse Side   | · .   |                                    |

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Title 18 U.S.C. Section 1001, makes it a crime tor any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.