(November 1983) (Formerly 9–331)		THE INT	SUBLET IN TRIPE (Other Instructions ERIOR Terms side) CORE	OD re- 5. LEASE DESIGNATION AND SERIAL NO.
	BUREAU O	F LA MANAGEM	ENTrawer DD	1 NM-24777
SUNDR	Y NOTICE	AND REPORT		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
			lug back to a different reservois	r
1.	- AFFEIGRIO	TORTERBITE TO	RECEIVED BY	7. UNIT AGREEMENT NAME
WELL X WELL	OTHER	,•	KECEIVED BY	SUNEX FEDERAL UNIT
2. NAME OF OPERATOR			DEC 22 1986	8. FARM OR LEASE NAME
_	J.C. WILLI	AMSON	DLO & & 1300	
3. ADDRESS OF OPERATOR			O. C. D.	9. WELL NO.
1. LOCATION OF WELL (Repor	P.O. BOX 1		ND, ARTESIA, OFFICE	2
See also space 17 below.) At surface	t location clearly	and in accordance with	any State required	10. FIELD AND POOL OR WILDCAT LOCAL NO. ACCES TO ACCU- EAST BRUSHY DRAW DELAWAR
	EAST BRUSHY DRAW DELAWAR			
	990' FSL 8	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		SURVEY OR ARMA
				Sec. 14, T26S R30E
14. PERMIT NO.	15	ELEVATIONS (Show wheth		12. COUNTY OR PARISH 13. STATE
		3152.0	O' GR	EDDY NEW MEXICO
.e.	Check Appro	oriate Box To Indica	te Nature of Notice, Repo	or Other Data
	E OF INTENTION		l	SUBSEQUENT REPORT OF:
Γ				
TEST WATER SHUT-OFF	<u></u>	OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT SHOOT OR ACIDIZE	ABANI	IPLE COMPLETE	FRACTURE TREATME	
REPAIR WELL	—i	DE PLANS		and Surface casing
(Other)			(Note: Repor	t results of multiple completion on Well Recompletion Report and Log form.)
se	t @ 800',	a.m., 12-13-86 cemented with 8 pprox. 200 sx o	300 sx Class "C" 1/4	-3/8" J-55 ST&C 805.55 4# flo seal, 2% calc.chl.
				SOLLEN MANAGE
		ACCEPTED	FOR RECORD	3 NEC 18 1986
		DEC	17 1986	J. Dr.
		In		DE ON THE STATE OF
		CARLSBAD,	NEW MEXICO	236
18. I hereby certify that the	foregoing is true	And correct		
SIGNED ///11	+ 70	(i, TITLE	Production	DATE 12-17-86
Jan P	fister			DAIN
(This space for Federal of	r State office us	e)		
APPROVED BY		TITLE _		DATE
CONDITIONS OF APPRO	DVAL, IF ANY:			

*See Instructions on Reverse Side