No	mm 3160-5 Invember 1983) Friedrick 9-331) DEPARTMENT OF TH BUREAU OF LAND MA	E INTERIO	SUBMIT IN TRIPLICAT (Other instructions on verse side)		Expires August 31, EASE DESIGNATION AND SF-080107	1985	
_	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.)				F INDIAN, ALLOTTEE OR ?	TRIBE NAME	
1.	OU. [7] GAS [7]				. UNIT AGREEMENT NAME		
	WELL X WELL OTHER NAME OF OPERATOR			8. 1	FARM OR LEASE NAME		
2.	T. H. McElvain Jr. for TA McE	Unio Od6	Pornerties	\mathcal{R}	Zanotti		
3.	ADDRESS OF OPERATOR	10011-0-0-1	Терез не	9.	WELL NO.		
	220 Shelby St. P. O. Box 2148	3 Santa Fe	NM 87504-2148		PIELD AND POOL, OR WIL	DCAT	
4.	LOCATION OF WELL (Report location clearly and in accordance with any state of the s						
	At surface				Lybrook Gallup		
	560' FNL & 1980' FWL				SURVEY OR ARMA		
					Sec. 34 T-24N R-7W		
14.	PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			12.	COUNTY OR PARISH 13.	STATE	
	6934_I	D.F.		Ri	o Arriba	NM	
- - 16.	Check Appropriate Box T	o Indicate Na	ure of Notice, Report, o	r Other	Data		
	·				INT EMPORT OF:		
	TEST WATER SHITTOFF PULL OR ALTER CASI	ING	WATER SHUT-OFF		REPAIRING WELL		
	TEST WATER SHUT-OFF PULL OR ALTER CASI FRACTURE TREAT MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING		
	SHOOT OR ACIDIZE ABANDON*		SHOOTING OR ACIDIZING		ABANDON MENT*		
	REPAIR WELL CHANGE PLANS		(Other)	mits of m	of multiple completion on Well		
	(Other) Extention of notice X Completion or Recompletion of Re				Report and Log Iorm.)		
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					AND AND ASSESSMENT OF THE PARTY		
					APPROV	ED	
18	I hereby certify that the foregoing is true and correct	Age	nt: T.H. McElvain	Co.	DATE Novembe	er 9, 198	
	(This space for Federal or State office use)			1	NOV) 19 19	187 ₂	
	APPROVED BY	TITLE			DATE		
	CONDITIONS OF APPROVAL, IF ANY:			FAMILIE TON RESOUR	R KARADEA		
	∧ - •c	oo Instructions	on Reverse Side	1	THE WILLIAM THE SOUTH		