Fenn 3160-5 (November 1983) (Formerly 9-331)

## UNITED STATES SUBMIT IN TRIPLICATE\* Other instructions on re DEPARTMENT OF THE INTERIOR verse side)

BUREAU OF LAND MANAGEMENT

Expires August 31, 1985

5.	LEASE	DESIGN	ATION	AND	BERIAI	NO.
4	10	1 -	12	e	24	
-6.₩	IF IND	IAN: AL	LOTTE	62	TRIBE	NAME

CUNIDAY	NOTICES' AND	REPORTS	ON	WELLS
SUNDER	MOHICES WIND	KEI OKIS	OI 1	11000

	201467	I INCHICES '	17 10 110 0 1110	
	00. 12.1		A. daanan as 100	g back to a different reservoir.
Do not	use this form	for proposals to ar	III OL to despen or brail	P DECE TO & GITTLE LEGEL LOUIS
ווייים מענן	mae than torin	HADDITCATION FO	IR PERMIT—" for such	n proposals.)

Use "APPLICATION FOR PERMIT—" for such proposals.)	
	7. UNIT AGREEMENT NAME
OIL GAS WELL OTHER  2. NAME OF OPERATOR	S. FARM OR LEASE NAME
ILEBIO OIL CO.	GREVEY
ALUCI SUN SUCUTION EL PHSO TX 79922	F. WHILL NO.
100 ATION OF WELL Report location clearly and in accordance with any State requirements.	10. FIELD AND POOL, OR WILDCAT
See also space 17 below.) At surface	11. SEC., T., E., M., OR BLE. AND
10 1 a market and the second of	SURVEY OR ARMA
480' FNL 480 FWL NW/4 NW/4  15. ELEVATIONS (Show whether DF, RT. CR. etc.)	12. COUNTY OR PARISH 13. STATE
14. PERMIT NO.	RID ARRIBO IVIN

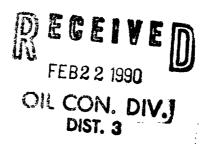
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF.			
	<u></u> ,			Ĺ	<del></del> 7	
TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF	REPAIRING WELL	
		MULTIPLE COMPLETE		FRACTUBE TREATMENT	ALTERING CASING	1
FRACTURE TREAT		MULTIPLE COMPLETE	j	-		
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING	ABANDONMENT*	1
		CHANGE PLANS		(Other) and frage	OF OPERATOR	-lX
REPAIR WELL	L;	CHANGE TEATE		(Note: Report resu	its of multiple completion on we	ell
(Other)			1 1 1	Completion or Recor	apletion Report and Log form.)	

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.) \*

FORMER OPERATOR. WIFAN-SAN INC 20. 130× 349 DEMINE N.M. 88030

PRESENT OPERATOR IFEBLO DIL CO. 4381 1304 SCOUTLN. ELPHSOTX.79922 130NO # N.M. 1656



18. I hereby certify that the foregoing is true and correct	TITLE CANALA	DATE 10-17-89
(This space for Federal or State office use)		TOTAL PROPERTY.
APPROVED BY	TITLE	DATE

\*See Instructions on Reverse Side