Form	9-331
(May	1963)

UNITED STATES

SUBMIT IN TRIPLICATE.

(May 1963)			E INTERIOR (Other Instructions on re- survey			5. LEASE DESIGNATION AND SERIAL NO. USNM-12020 6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
	GI	OLOGICAL SU						
(Do not us	SUNDRY NOTIONS this form for proposa Use "APPLICAT	CES AND RE	PORTS (pen or plug b -" for such p	ON WELLS ack to a different reservoir. roposals.)				
1.					7. UNI	r agreement Na	** A	
WE'L W	VELL X OTHER				8. FAR	M OR LEASE NAM	<u> </u>	
2. NAME OF OPERA					1 7	by Gallego	Ţ ,	
	oloration Compa	iny			9. WEI			
3. ADDRESS OF OP		Toyac 770	01		2	•		
P.O. Box 1745, Houston, Texas 77001 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*						10. FIELD AND POOL, OR WILDCAT		
See also space 17 below.)				WAV	WAW Pictured Cliff			
At surface					11. sx	C., T., R., M., OR B SURVEY OR AREA	LK. AND	
790' FSL & 790' FWL					Sec	Sec 26, T27N, R13W		
14. PERMIT NO. 15. ELEVATIONS			ow whether Di	, RT, GR, etc.)		UNTY OR PARISH		
11. 12		6075	GR		Sar	n Juan	New Mexico	
	CL I A	Pou To	Indicate A	Nature of Notice, Report,	or Other D	ata		
16.			mulcule i		BSEQUENT RE			
	NOTICE OF INTENT	non to:			V	REPAIRING V	WRIT.	
TEST WATER		ULL OR ALTER CASIN	G	WATER SHUT-OFF	-4-	ALTERING C	11	
FRACTURE TRI		ULTIPLE COMPLETE		FRACTURE TREATMENT SHOOTING OR ACIDIZING	,	ABANDONMEI		
SHOOT OR ACI	·	BANDON*		(O4ha=)				
REPAIR WELL	c	HANGE PLANS		(Note: Report r Completion or Re	esults of mul	tiple completion eport and Log for	on Well rm.)	
(Other) 17. DESCRIBE PROP proposed we nent to this	OLK" II MEN TO GIVECOLO	RATIONS (Clearly standard drilled, give standard)	te all pertine ubsurface loca	nt details, and give pertinent tions and measured and true		costume ted det	A Af etarting ant	
CNL-GR-Ca	aliper. Ran 30	joints of	4½" OD 3 + 2% Ca(th 4:30 P.M. 1-17- 10.79# ST&C casing CL ₂ . Circulated 1 cement and wait on	and land 5 sacks	ded at 152 cement ret	. o.	
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			å			IAN 21	1977	
				The List of the last of the la		JAN 21		
				JAN 24 1977	+ s		• <u>•</u>	
			. /	DIL CON COM. DIST. 3				
18. I hereby cert	tify that the foregoing i	s true and correct		Agent		1-20)-77	
signed	W. T. Jones	Jins	TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		DATE		
(This space	for Federal or State off	ce use)				TO A MYS		
			MYDT T			DATE		

TITLE _

APPROVED BY _______CONDITIONS OF APPROVAL, IF ANY: