Form 1-331 (May 1963)	UNITED STAT EPARTMENT OF THE GEOLOGICAL SU	INTERIOR verse bide)	TRIPLICATES Hud	m App. 3674 get Bureau No. 42 B1424. HONATION AND BERIAL NO.
(Do not use this form Use	Y NOTICES AND REI	PORTS ON WELLS	6. IF INDIAN,	jo Tribal
OIL GAB WELL	OTHER		8. FARM OR I	
TASCO			King	Kong
8. ADDRESS OF OPERATOR	Suite 110, Farming	gton, New Mexico		ted below
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface				Creek Dakota E., M., OR BLE. AND Y OF AREA -17-W
14. PERMIT NO.	15. ELEVATIONS (Sho	ow whether DF, RT, GR, etc.)	12. COUNTY San Jua	1
16.	Check Appropriate Box To	Indicate Nature of Notice,	Report, or Other Data	
NOTI	CB OF INTENTION TO:		SUBSEQUENT REPORT O	F:
TEST WATER SHUT-OFF	PULL OR ALTER CASING MULTIPLE COMPLETE	WATER SHUT FRACTURE TE SHOOTING OF	REATMENT	EPAIRING WELL LITERING CABING BANDONMENT*
SHOOT OR ACIDIZE	ABANDON® CHANGE PLANS	(Orbar) Cl	hange of ownership	X
REPAIR WELL (Other)	MPLETED OPERATIONS (Clearly state	(Note:	: Report results of multiple contion or Recompletion Report a	nu Log Torm.)
Change from R.	A. Crane Jr. Box 3. Airport dr. Suite S 3 E-4-T30N-R17	56 Fruitland New Med 110 Farmington, New W	xico	
	12 F-4-T30N-R177 13 F-4-T30N-R177 14 G-4-T30N-R177 15 G-4-T30N-R177 16 G-4-T30N-R177 17 G-4-T30N-R177 21 H-4-T30N-R177	พ พ พ พ พ		
•	22 G-4-T30N-R17 23 G-4-T30N-R17 24 G-4-T30N-R17 18 G-4-T30N-R17 19 G-4-T30N-R17 50 K-4-T30N-R17	พ พ พ พ พ	AUG 23 1978 OIL CON. COM OIL CON. T. 3	
			Our DIS.	
18. I hereby certify that the	foregoing is true and correct	TITLE Operator	DATE	8-25-78
(This space for Federal	or State office use)			•
		TITLE	DATE	
CONDITIONS OF APPI	ROYAL, IF ANT:	TITLE		