| Form 9-331<br>(May 1963)  | UIED S                                |                    | SUBMIT IN TRIP. JATE   |  | u No. 42-R1424.         |
|---|---------------------------------------|--------------------|--|--|-------------------------|
|   | GEOLOGICA                             |                    | ION verse side)  | 0332646  | 1                       |
|   | · · · · · · · · · · · · · · · · · · · |                    | 0)   )   | 6. IF INDIAN, ALLOTTES   |                         |
| 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.) |                                       |                    |  |  |                         |
| 1. OIL GAS  | ·                                     | R                  | EILIVED  | 7. UNIT AGREEMENT NA   | ME                      |
| WELL WELL   | X OTHER                               |                    |  | - <del>                                    </del>  | i gđ£                   |
| 2. NAME OF OPERATOR   |                                       |                    | AP 1973  | 8. FARM OR LEASE NAM   | Ti                      |
| R. L. FO  |                                       |                    |  | Midwest Fed  | leral "X"               |
| <del>-</del> ,  |                                       | Bldg., Da          | llas. Texas 75202  | 10. FIELD AND POOL, OF   | R WILDCAT               |
| See also space 17 belo<br>At surface 660 t  | // Sams Ra                            | mch //             |  |  |                         |
| J ··  | County, New Mex                       | 100                |  | SURVEY OR AREA   |                         |
| , , , , , , , , , , , , , , , , , , ,   |                                       |                    |  | Sec. 4, T-14   |                         |
| 14. PERMIT NO.  |                                       | NS (Show whether D |  | 12. COUNTY OF PARISH   | 1                       |
| Approved 12-2   | 7-1972 K.                             | B. 3581            | G.L. 3575  | Chaves   | N. Mexic                |
| 16.   | Check Appropriate Bo                  | ox To Indicate N   | Nature of Notice, Report, or (   | Other Data   | F ENGT                  |
| 1   | NOTICE OF INTENTION TO:               |                    | SUBSEC   | QUENT REPORT OF  |                         |
| TEST WATER SHUT-OF  | PULL OR ALTER                         | CASING             | WATER SHUT-OFF   | REPAIRING W  | VELT.                   |
| FRACTURE TREAT  | MULTIPLE COME                         | 11                 | FRACTURE TREATMENT   | ALTERING CA  |                         |
| SHOOT OR ACIDIZE  | ABANDON*                              |                    | SHOOTING OR ACIDIZING  | ABANDONMEN   | . []                    |
| REPAIR WELL   | CHANGE PLANS                          |                    | (Other) Cement 8-  |  |                         |
| (Other)   |                                       |                    | (Note: Report result<br>Completion or Recomp   | s of multiple completion operation of the second completion Report and Log for   | on Well<br>m.)          |
|   | H. cement with                        | h 2% calci         | ace pipe, cemented an chloride.  | a granbard<br>a granbard<br>a free co<br>a bargar ar   |                         |
|   |                                       |                    | Section of the sectio |  |                         |
|   |                                       |                    | AP<br>6. S. 65<br>artes  | R2) Property in the control of the c | por or sid oldrent on   |
|   |                                       |                    |  | Report<br>Variable<br>States<br>Report<br>Report<br>Report   | office to               |
| 18. I hereby certify that   | the foregoing is true and corr        | rect               |  |  |                         |
|   | The roteging is true and con-         |                    | Agent  | DATE ADri  | <u>.</u><br>1 18 - 1072 |
| SIGNED  |                                       | TITLE              |  | DATE Apri  |                         |
|   | ral or State office use)              |                    |  |  |                         |
| APPROVED BY CONDITIONS OF AL  | PPROVAL IF ANY:                       | TITLE              |  | DATE N   |                         |
| 1 pill  |                                       |                    | •  |  |                         |