Form 9-331 Dec. 1973

	N≠ UIL CONS.	COMMISS
	Dog or DD	
JUL 1 3 1932 TED STATE	ES Artesia, NM	88210 5

RECEIVED  N≠ OIL CONS. COM  1973  Disper DD	MISSION Form Approved. Budget Bureau No. 42-R1424
JUL 13 1932 TED STATES Artesia, NW 882	210 5. LEASE
DEPARTMENT OF THE INTERIOR	- USA - NIM - 11795
ST ARTESIA, OFFICE	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
not use this form for proposals to drill or to deepen or plane (CE) selferen rvoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
oil gas 🖄 other JUN 1 1982	9. WELL NO.
NAME OF OPERATOR	6
Tack Sovabore + Assoc O.C.D	10. FIELD OR WILDCAT NAME

X well  $\square$ JUN : other well 2. NAME OF OPERATOR 3. ADDRESS OF OPERATOR ARTESIA, OFFICE 1050 17th St 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 AT SURFACE: 660 FNL AT TOP PROD. INTERVAL: AT TOTAL DEPTH: -16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.

(Do not use this form for proposals to drill or to deepen or plunce reservoir. Use Form 9-331-C for such proposals.)

20265 Met. Peccs Slope Abo 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13 T65 R24E 12. COUNTY OR PARISH 13. STATE 14. API NO.

REPORT, OR OTHER DATA

15. ELEVATIONS (SHOW DF, KDB, AND, WD)

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON\* (other)

SUBSEQUENT REPORT OF:

MAY 2.5 1982 U. S. GEOLOGICAL SURVEY

DOSMELL, NEW MEXICO 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.)\* lemperarily suspended drilling operations on May 21, 1982. 904 of surface hole, ran surface casing to 904, cecirculating 60 sacts with good retur nen implifed off

3 JUN 03-1982

SANTA FE Subsurface Safety Valve: Manu. and Type

18. I hereby certify that the foregoing is true and correct

SIGNED

(This space for Federal or State office use)

APPROVED TITLE APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

(One SEA) GEORGE H STEWARD

FOR

\*See Instructions on Reverse Side JAMES A. GILLHAM

DISTRICT SUPERVISOR

this is all our about hove to ment