	L D ST				
SUN (Do not use this	DEPARTMENT OF T	ATES	SUBMIT IN TR.	Form approved. Budget Bureau	To. 42-R142
(Do not use this		HE INTERIOR	verse side)	5. LEASE DESIGNATION AND	BERIAL NO.
(Do not use this	GEOLOGICAL	SURVEY		NM-04501	347
(Do not use this	IDDY MOTICES AND	DEDODIC ON	WELLS	6. IF INDIAN, ALLOTTEE OR	IRIBE NAME
·	IDRY NOTICES AND				
	form for proposals to drul of to Use "APPLICATION FOR PERM	IT—" for such propos	als.)		
				7. UNIT AGREEMENT NAME	·····
OIL GAS WELL	Deple				
		IED		8. FARM OR LEASE NAME	
ANEDICAN PETE	ROLEUM CORPORATION			FENERAL A	
ADDRESS OF OPERATOR				9. WELL NO.	
BOX 68, HOBBS, N				2	
		adance with any Stat	a regularmente 8	10. FIELD AND POOL-OR W	ILDCAT
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface				2011/11 5. 7.	
At surface				11. SEC., T., E., M., OR BLE.	LUS
		,		SULVEY OR AREA	A.1.D
10 an' ENI	- × 1980' FEL	Sac 13/1/a	HG SWANE/4	1130 35 1	140 44
		<u> 020 19011</u>		1 13-9-35 10	NUN
4. PERMIT NO.	15. ELEVATIONS	(Show whether DI; RT,	0	12. COUNTY OR PARISH 13	D, BIATE
		412	Z RDB	I LEA	<u>10 M</u>
6.	Check Appropriate Box	To Indicate Natu	re of Notice Report o	or Other Data	
	• • •	· ·			
	NOTICE OF INTENTION TO:		BUB	SEQUENT REPORT OF	
TEST WATER SHUT-0	PULL OR ALTER CA	8170	WATER SHUT-OFF	REPAIRING WEL	ւ
FRACTURE TREAT	MULTIPLE COMPLE	TE	FRACTURE TREATMENT	ALTERING CABIN	10
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	*THEMNODIAGE	X
REPAIR WELL	CHANGE PLANS		(Other)		
(Other)			(Norm: Report res	mits of multiple completion on impletion Report and Log form.)	Well
7 NECESTE PROPORTO O	R COMPLETED OPERATIONS (Clearly well is directionally drilled, give	state all pertinent de	tally and give pertinent de	tes, including estimated date of	starting ar
4205- Mrd Conto	ed 20st cem 4105, 102 Junal clea sur	eut pluz			t.
				그 선물원하는 의원 사고 그는	
(This space for Federal APPROVED BY CONDITIONS OF A	the foregoing is true and correct eral or State office use)			PROVED DATE	20-6/
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