Form 9-331 (May 1963)

## UN DISTATES S DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLI
(Other instructions

Form approved.

Budget Bureau No. 42-R1424.

(May 2000)	DEPARTMENT OF THE INTERIOR verse side)  GEOLOGICAL SURVEY				LC-069300		
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.)				6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
1.  GIL GAS WELL WELL OTHER					7. UNIT AGREEMENT NAME		
NAME OF OPERATOR					8. FARM OR LEASE NAME		
Socony Mobil Oil Company, Inc.				Cox-Federal			
Box 1800, Hobbs, New Mexico				3			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  1980* FNL & 660* FWL of Sec.  Unit **E** NW/4, NW/4					10. FIELD AND POOL, OR WILDCAT Allison Penn		
				11. SEC., T., R., M., SURVEY OR A	REA		
14. PERMIT NO.	15. ELEVA	rions (Show whether I	F, RT, GR, etc.)	12. COUNTY OR PAR	RISH 13. STATE		
	404	18 GR		Lea	New Mexico		
16.	Check Appropriate	Box To Indicate	Nature of Notice, Report, or	r Other Data			
			WARDS GWUR ONE	REPAIRI	NG WELL		
TEST WATER SHUT-	( <del></del> )		WATER SHUT-OFF FRACTURE TREATMENT	<del></del>	G CASING		
FRACTURE TREAT	MULTIPLE CO	X	SHOOTING OR ACIDIZING	ABANDO	MENT*		
SHOOT OR ACIDIZE REPAIR WELL	CHANGE PLA	NS	(Other)				
(Other)	1		(Note: Report rest Completion or Reco ent details, and give pertinent da ations and measured and true ver	ults of multiple complet mpletion Report and Log	g rorm.)		
Propose to Top of ceme at surface	to complete well: plug and abandon prt 4923 approx	well. Spot Imately 100'4	(4956'-5023' OA) Sw 30 sx cement across Pull 2" tubing articall 4" marker for fi	san Andres per nd spot 6 sx c	ement		
well.		r Lillian (1988)					
	s will confirm ve	rbal approval	with Mr. A. R. Brow	wn and Mr. Joe			
18. I hereby certify the	t the teragoing is true and	correctTITLE	Group Supervisor	DATE 1	-14-65		
(This space ker He	deral or State office use)		•		MEDI		
APPROVED BY	APPROVAL, IF ANY:	TITLE		APPW	1005		

\*See Instructions on Reverse Side

DISTRICT ENGINEER